

Policy Substance or Simplified Politics?  
How the Healthcare Reform Public Option was Portrayed in Newspaper Editorials

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## **Abstract**

Carol Bain Kelly: Policy Substance or Simplified Politics?  
How the Healthcare Public Option was Portrayed in Newspaper Editorials  
(Under the direction of Anne Johnston, Lois Boynton and Donna Havens)

This thesis examined the portrayal of the public option proposal for healthcare reform in newspaper editorials during the height of Congressional debate and media attention, June through December 2009. Using a mixed-methods approach, a quantitative content analysis determined editorial stance and compared different United States regions to one another, and a qualitative textual analysis identified and illustrated frames in editorials.

Overall, 62% of editorials supported the public option, 21% opposed it, and 17% remained balanced. Social, ethical and political values applicable to healthcare reform guided the qualitative analysis. Cost control, greediness and pure politics were the primary themes. The social and ethical frames considered healthcare provision remedies and societal rights while the political frame was concerned with characterizations, drama and strategy about the public option. Divergent perspectives about individual freedom and responsibility for the provision of health insurance marked the debate. Editorials contained both policy substance and simplified politics.

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## **Chapter One**

### **Introduction**

After many attempts for nearly 100 years, healthcare reform became law on March 23, 2010. During 2009, leading up to passage of the Affordable Care Act, the public option was a major part of the healthcare reform debate. The pitch was relatively simple: the public option was proposed as an insurance plan run by the government that uninsured individuals could choose over private insurance. Citizens who chose the public option would pay a premium to the government sufficient to cover administrative and benefit costs.

The public option was a health policy proposal with competing values between those who supported and opposed the plan. Supporters said the public option would offer basic coverage, keep costs low, and ensure private insurance companies offered fair rates (Holan, 2010). Because the government has more leverage than private industry when negotiating with hospitals and providers, the public option would likely cost less than private insurance plans. In opposition, political conservatives said the public option would be the first step toward an eventual single-payer system or that it would entail unfair competition for private providers. The public option turned into a contentious political issue that was supported by most, but not all, Democrats and opposed by nearly all Republicans.

Health insurance as a public program was not a new idea in 2009. The United States is the only industrialized country without national health insurance, but has tried to achieve it at least five times (Harrison, 2003). Each attempt at reform generated extensive debate. Both policy makers and the public rely on the media for communicating news and ideas about



health proposal issues. The purpose of this research is to examine how the arguments about the public option played out in the news media, specifically newspaper editorials, during the height of political debate in 2009.

### **The Public Option of Health Reform**

In April 2009, Nancy-Ann DeParle, the director of the White House Office of Health Reform, described the public option as,

*sponsored by the government, and therefore has very low or almost nonexistent administrative costs, compared to others. It doesn't need to have brokers out selling; it wouldn't have the need to have a lot of costs and profits, the way private plans would. So it has that advantage. It could operate by the same rules that all other plans do; it could have payments rates that are very similar. Or it could have payment rates that are the same as Medicare—that's one idea that's been used. So there are various ways of looking at it (WSJ, 2009).*

President Obama said the public option should not be something that is an unaccountable taxpayer-subsidized system, but rather should be self-sustaining through premiums and should compete with private insurers (Tumulty, 2009).

A public option was included in the healthcare reform bill passed on November 7, 2009, by the U.S. House of Representatives, the Affordable Health Care for America Act.

Under provisions for protecting and improving consumer's choices, the bill summary stated:

*One of the many choices of health insurance within the Health Insurance Exchange is a public health insurance option. It will be a new choice in many areas of our country dominated by just one or two private insurers today. The public option will operate on a level playing field. It will be subject to the same market reforms and consumer protections as other private plans in the Exchange and it will be self-sustaining financed only by its premiums. The Secretary of Health and Human Services will administer the public option and negotiate rates for providers that participate in the public option. The public health insurance option is provided startup administrative funding, but it is required to amortize these costs into future premiums. Providers are presumed to be participants in the public option unless they opt-out of participating (AHCAA, 2009).*

The U.S. Senate did not include a public option in its final version of a healthcare reform bill passed on December 24, 2009, however. Despite the fact that the President, a majority of Americans, and the Democratic majority leadership in both houses of Congress clearly favored the public option, several senators who opposed this aspect of health care reform defeated the inclusion of the public option in a final health care reform bill. Next, a brief history of healthcare reform followed by a review of how the media reported on the public option in 2009 is presented.

### **Healthcare Reform History Brief**

The American healthcare system is a complex mix of public and private interests in terms of administration, financing, and the delivery of care. From 1915 when the American Association for Labor Legislation proposed a national health insurance system to 2004 when President Clinton offered a sweeping healthcare reform proposal, efforts to create or modify healthcare at the national level surfaced and faded regularly (Harrison, 2003). The historical origins of health insurance as a public program are linked more to concerns about income maintenance, national economic power, and political stability than to the financing of medical care (Starr, 1982). However, access to healthcare in the United States has become largely dependent on having health insurance, leading to public policy reform proposals focused on expanding health insurance coverage. The failure of recent attempts to establish national health insurance are due to interest group politics, most notably the vehement opposition of the insurance industry and professional medical associations (Harrison, 2003).

*Health care costs and insurance premiums are growing at rates greater than the U.S. economy and family incomes.... This trend shows no signs of abating.... The rapid growth in health care costs is making it increasingly difficult for U.S. employers to offer health insurance coverage to their workers.... Furthermore, even when employers are able to offer health insurance to their employees, increasing numbers of employees are declining*

*these offers because they cannot afford the premiums.... Individuals without employer-sponsored health insurance who are not eligible for public insurance must rely on a limited non-group health insurance market to obtain coverage. The premium costs for non-group coverage can be exceedingly high and individual subscribers must pay the entire cost without a contribution from an employer (IOM, 2009).*

In 2007, 45.7 million people in the United States lacked health insurance according to the Census Bureau, marking a continued decline in health insurance coverage over a decade.

### **Healthcare Reform Reporting**

Healthcare reform is a complex story to report and a media challenge. “As media fodder, health care and health policy have it all: lots of money, drama and conflict” (Mebane, 2003, p. 50). Healthcare reform had an 11 out of 13 weeks run as the top news story category from July 20 to November 1, 2009 according to the News Coverage Index by the Pew Research Center’s Project for Excellence in Journalism. This coverage was primarily by cable television. For example, in mid-August 2009, the healthcare debate accounted for 62% of cable television coverage but less than 20% of newspaper coverage.

In a content analysis of more than 5,500 healthcare stories from June 2009 through March 2010, a Pew study summarized how the media handled the healthcare reform debate with these six themes:

- 1. Despite ebbs and flows in the coverage, healthcare was the number one story in the mainstream media from June 2009 through March 2010.*
- 2. To a great extent, the healthcare debate was a talk show story, getting the most attention from the ideological cable and radio hosts.*
- 3. In the talk show universe, healthcare was a much bigger topic for the liberal hosts than the conservative ones.*
- 4. For much of the healthcare debate, opponents of the legislation did a better job than supporters of winning the message war.*
- 5. The media told us plenty about the politics of the healthcare debate, but much less about the workings of the healthcare system.*
- 6. Before he re-emerged as the healthcare catalyst in 2010, Barack Obama had been a dramatically diminishing presence in the story (Project for Excellence in Journalism, 2010).*

Pew also identified the top healthcare reform storylines by media platform. For newspapers, the top stories concerned politics and strategy (36%), description of plans (21%), state of health care/trends/effect of economic crisis (18%), legislative process (6%), and Obama's healthcare plan (5%) (Project for Excellence in Journalism, 2010). The public option was presented as a politically polarizing issue in cable television reports; however, newspapers offered more evenly divided coverage of the health policy debate (Project for Excellence in Journalism, 2009). The public option was an important issue, but it was disproportionately covered because of its larger ideological symbolism (Altman, 2009).

Prior to the 2009 coverage, healthcare reform proposals under four other presidents (Truman, Johnson, Nixon, and Clinton) all had wide public interest and media attention. Most recently, healthcare reform was a major media story during President Clinton's first term. Continuing the review of media coverage of healthcare reform, an overview of editorial content during 1994 is the next section.

### **Healthcare Reform Editorials in 1994**

In a yearlong content analysis of all editorials published in 10 newspapers, Vermeer (2002) found that healthcare reform was the most-frequent topic as Congress considered President Clinton's proposal. The perspectives shifted as the debate raged from March through August of that year. In March, editors were generally optimistic, not necessarily about a major legislative accomplishment occurring, but about members of Congress seriously tackling the issue of healthcare reform. By late June, concern about gridlock and a mood that drifted between uneasy support and uneasy opposition prevailed in editorials. By August, most observers realized that healthcare reform would not be passed in 1994.

Editorials called out partisan politics with particular Congressional members blocking serious legislative work and finger pointing in Washington, D.C.

### **Public Opinion about Healthcare Reform**

Along with reporting the politics of healthcare reform and dismal statistics about health insurance coverage and costs, the media sponsored or provided information from many public opinion polls on healthcare reform. Several prominent national polls included specific questions about the public option, and these polls found that a majority of Americans supported the public option. CNN used the Opinion Research Corporation to poll citizens five times by telephone from August 2009 to December 2009 with those in favor of the public option ranging from 53% to 61% over that time period. When presented with the option of a government-administered health insurance plan similar to Medicare to compete with private health insurance companies, 72% of respondents favored the option in a June 2009 poll by CBS News. Another poll by CBS News in September 2009 that repeated the June question found 68% of Americans supported the public option. Findings from the independent Kaiser Health Tracking Poll, sponsored by the Kaiser Family Foundation in April 2009, line up with media polls in that 67% of respondents favored the idea of creating a public health insurance option to compete with private health insurance plans.

A majority of people, ranging from 58% to 76% from mid-August to mid-November 2009, said they followed the overall debate about healthcare reform in the media very or fairly closely. But, following the debate and understanding the debate are different. The number of people who said the overall healthcare debate was hard to understand increased from 63% in July 2009 to 69% in December 2009 (Project for Excellence in Journalism, 2010).

Personal coverage and cost issues made healthcare reform the third-most-important issue for all voters in the 2008 presidential election. In a 2008 national survey, 69% of respondents said the healthcare system either had major problems or was in crisis (Blendon et al., 2008). These views suggested that passage of healthcare reform legislation would be a possibility for the incoming administration.

## **Summary**

A healthcare reform bill passed in 2010; however, the public option proposal, which many considered essential for true system reform, was not included in the final law. The public option was a pivotal issue that a majority of citizens knew about and supported. As with the 1994 legislative attempt to reform healthcare, the most-recent healthcare reform debate was confusing, emotional, and fueled by fears along with widely divergent concepts of personal liberty and government responsibility.

With broad public concern and media interest, the legislative debate over healthcare reform became a top news story in 2009. Heated debate about healthcare reform permeated several forms of the media, particularly cable television shows, but also radio, newspapers, and various online forums. Coverage of the public option by all forms of the media is well documented, but an analysis of the debate as conveyed in newspaper editorials has not been done. Given the high level of attention paid to healthcare reform in the news media, the public option had enough prominence and controversy to provoke comment in most editorial pages. This thesis examines the portrayal of the public option proposal for healthcare reform in newspaper editorials during the height of Congressional debate and media attention in 2009. The literature review that follows first briefly reviews media influence and then provides evidence for why an examination of newspaper editorials matters.

## **Chapter Two**

### **Literature Review**

#### **Media Influence in Policy Debates**

The relationship among news media, interest groups, and politicians is interdependent, with interest groups and politicians seeking media visibility to lead political debates (Callaghan & Schnell, 2001). The media can be a balancer in the political system because the way issues are presented may determine whether public judgments are based on a real understanding of proposals or on tactics by political operatives to slant media coverage (Altman, 2009). Journalists and editors serve as gatekeepers based on the issues they choose to cover and the amount of coverage they provide. However, the market-driven environment in which the media operate places it in competition for consumers. Media channels fashion news content to attract consumer segments (Bennett & Iyengar, 2008). Entman (2007) suggests that when the media clearly slants, political viewpoints favored by the slant become more powerful. While convincing evidence suggests the media have power to influence public opinion about policy issues (Callaghan & Schnell, 2001), the net effect of that influence may be waning as the public increasingly selects content consistent with their beliefs (Bennett & Iyengar, 2008).

#### **Why Analyze Editorials?**

A media discourse that includes a broad segment of American society can be explained by analyzing editorials (Richardson & Lancendorfer, 2004). Editorials combine facts and opinion and, therefore, are a powerful source for examining press attitudes toward

controversial issues. Newspaper editorials are intended to serve a clarification or interpretive function in providing information to readers. Through editorials, newspapers endorse candidates for elected office, take stances on issues, advocate positions, criticize government decisions, and comment on events. Editorials are considered the institutional opinion of the newspaper and contribute to the public discourse in their home communities (Meltzer, 2007). A vibrant public discourse with complex intellectualism may be found in expressions of opinion such as editorials (Hoffman & Slater, 2007).

Editorials, in print or on newspaper websites, remain significant by providing well-formed statements about public issues. However, researchers have various points of view about the scope and influence of newspaper editorials. One point of view is that editorial writers provide leadership to their community by publishing the opinion of the newspaper as an institution (Richardson & Lancendorfer, 2004). If good journalistic editorial practices are followed, the editorial page is the only place in an American newspaper where opinion is allowed; therefore, the board that oversees editorials has the potential power to direct readers' opinions (Meltzer, 2007). A counterpoint to this view is that editorials are a source of thoughtful comment, providing the "calm analysis that puts news in its proper perspective" (Hendrickson & Hale, 2004, p. 25) from which readers form their own opinions. Striking a place in the middle, readers may compare their own viewpoints with the opinions offered by newspaper editorials (Hynds & Archibald, 1996). Whether or not editorials lead public opinion or merely provide a basis from which public opinions may be formed, editorial positions matter because coverage of an issue affects ordinary citizens and their involvement with issues or identification with other people (Entman, 1993).



When local newspaper editors write about a national political issue, they signal to readers the importance of that issue for local or state concerns. Editorials can reach a significant readership and be a dominant voice on the connection of local and state issues to national issues. People rely on editorials in the news media to help them understand how policy options may affect them. However, because local conditions vary, readers in different communities may have different perspectives about what national political issues mean to them (Vermeer, 2002).

### **Limitations Associated with Analyzing Editorials**

Three limitations associated with editorial analysis were found in the literature. First, a primary limitation is the risk in assuming that editorials stand alone in tackling the responsibility of informing newspaper readers about controversial issues (Hendrickson & Hale, 2004). Second, editorials that take stands, clarify issues, or make recommendations for change in public policy help satisfy a newspaper's obligation to inform readers, but only the readers of that editorial. Third, editorials are only one of many available media sources of information or commentary for the public, and the findings from a review of editorials cannot be generalized to other media reporting (Landreville & LeGrange, 2007). Despite these inherent limitations, which are mentioned to provide context for the research, an analysis of editorials as significant statements of press attitude and judgment is well justified. The opinions contained in editorials may be analyzed to see if particular themes prevail over others, a concept known as frames.

### **Frames**

The process in which particular concepts are formed is called framing (Chong & Druckman, 2007). Essentially, a few aspects of a perceived reality are connected together in

a narrative to promote a particular interpretation (Entman, 2010). Framing “offers a way to describe the power of communicating text” (Entman, 1993, p. 51).

**Definition.** A frame is an idea through which political debate unfolds (Pan & Kosicki, 2001). Public policy issues tend to be complex and involve many factors and alternatives. In the area of public affairs, news coverage, including editorials, largely determines which policy considerations are accessible (Iyengar, 1990). The language with which public policies are discussed focuses attention on certain aspects of issues (Edelman, 1977). “The fundamental influences upon political beliefs flow, however, from language that is not perceived as political at all but nonetheless structures perceptions” (Edelman, 1977, p. 21). Framing entails specific concepts and terms used to present choice or decision options (Iyengar, 1990). While there are many definitions of frames, most researchers agree that frames give meaning to key features of issues (Lau & Schlesinger, 2005).

**Framing theory.** “The major premise of framing theory is that an issue can be viewed from a variety of perspectives and be constructed as having implications for multiple values or considerations” (Chong & Druckman, 2007, p. 104). People use frames to classify, organize, and interpret information (Pan & Kosicki, 1993). Framing places information in a unique context so that certain elements of an issue receive more of an individual's attention, and, consequentially, the selected elements influence judgment or inference making. “Frames call attention to some aspects of reality while obscuring other elements, which might lead audiences to have different reactions” (Entman, 1993, p. 55).

**Study of media framing.** Framing analysis is a common method for studying media content. Identifying frames is important because certain sides of the issue may seem more important, possibly priming the recipient of media messages to more readily receive certain

thoughts (Richardson & Lancendorfer, 2004). Much research in political communication deals with the question of how do the news media “set the frame in which citizens discuss public events” and subsequently “narrow the available political alternatives” (Pan & Kosicki, 1993, p. 55). Framing research has the potential to link media texts to broader social values and ideological issues shaped by political power (Carragee & Roefs, 2004). Particular value frames that emerged in the literature as most relevant to healthcare reform are discussed next.

### **Value Framing in Healthcare Reform**

Value frames are defined in terms of broad, abstract principles, and any given issue can hold multiple value frames (Wise & Brewer, 2010). Value framing involves using beliefs about morality, ethics, individual rights, and equality to define issues (Shen, 2004). Hoffman and Slater (2007) found that values are a primary means by which opinion articles about health policy issues are framed.

Similar to the issue of gun control (Callaghan & Schnell, 2001), the public option is an ideal policy issue to study framing because healthcare reform is one of the most-salient and long-standing debates in U.S. politics. Proposals for healthcare reform have historically generated intense conflict covered extensively by the news media. Most recently, the public option proposal for healthcare reform set the stage for a classic political conflict with clearly discernable messages from which frames may be identified. Social, ethical and political values are applicable to the public option and are considered in this review.

***Social values.*** Fundamental social values concerning healthcare are access, equity, and responsibility. A review of the history and the documented positions of political elites on the American healthcare system identified five dominant frames of healthcare as: 1) a societal right, 2) a community obligation, 3) an employer responsibility, 4) a marketable

commodity, and 5) a professional service (Lau & Schlesinger, 2005, p. 81). These social values may be traced to particular eras and have had periods of dominance over each other, but each still plays a role in contemporary health policy.

***Ethical values.*** Ethical values are used to justify policy stands, and ethical framing activates considerations about rights and morals (Shah et al., 2001). Personal principles about right and wrong, religious morals, and beliefs about human rights and civil rights enter the ethical framing of issues and contribute to polarizing public discourse around value expressions. Ethical values are intrinsic to editorials because editorial positions often argue for what should be done (Boeynik, 1993). Standards of moral fairness that take into account cultural values and social norms regarding just and equitable distribution of resources are part of the debate on health system reform (Blendon & Benson, 2001).

***Political values.*** Value conflict underlies American political behavior, and this conflict is rarely completely resolved (Ruger, 2007). Over the course of healthcare reform history, political adversaries have successfully prevented major changes in the healthcare system by convincing the public that reform threatened their core values. An analysis of the failure of President Clinton's attempt to reform healthcare found these political frames: 1) questioning of whether a crisis actually existed and, thus, if legislative efforts were justified; 2) creating a false dichotomy about regulation and competition leading to confusion about the roles of the private sector and government; and 3) polarizing citizens into ideological camps with which they might not entirely identify because of the creation of a false dichotomy between liberal and conservative plans.

## **Literature Review Summary**

One reason to study the framing of social concerns and related values is that frames affect public policy (Hertog & McLeod, 2001) as well as public opinion (Entman, 2007; Iyengar, 1990). As such, media frames reflect the larger public discourse (Entman, 2007). Issues, narrowly drawn conflicts about policy, are found within frames, which provide the base for issues to develop (Hertog & McLeod, 2001). Understanding the value framing of healthcare issues in editorial opinions should lead to a better understanding of the influence of media concerning those issues (Hoffman & Slater, 2007) because the context in which issues appear is critical to how people think about them (Iyengar, 1990).

Even though people no longer depend on newspapers and national broadcast evening news to stay informed about public affairs, mainstream news sources continue to matter for providing a “semblance of legitimation and news-driven polling” (Bennett & Iyengar, 2008, p. 717). Entman (2010) believes that mainstream outlets tend to treat the “political process critically but policy substance passively” (p. 395). The meaning of frames varies depending on circumstances (Hallahan, 1999), and one purpose of this study is to examine whether newspaper editorial frames were concerned with simplified and dramatized politics or substantive remedies to critical health policy problems. This purpose and others will be explored by addressing the following research questions.

### **Research Questions**

On the basis of the preceding literature review and summary, this study examined two primary research questions. The first research question had sub-questions, as follows:

RQ1. How did newspaper editorials portray the public option?

For RQ1, these sub-questions were examined:

- a. Where did editorials mentioning the public option appear? Are there regional differences?
- b. Do the editorials support, oppose, or remain balanced in their opinion about the public option?
- c. Do editorials link the national proposal for a public option to local issues or concerns? If yes, what are these issues/concerns?

RQ2. What are the dominant concepts and themes in editorial frames concerning the public option?

The research methods used to answer these questions are presented in the next chapter.

## **Chapter Three**

### **Methods**

This study concerns the intersection of a healthcare policy proposal and political communication as conveyed by newspaper editorials. A mixed-methods approach was used. A quantitative content analysis determined how the public option was depicted in editorials, and a qualitative textual analysis identified and illustrated the frames that were included in those editorials. Before presenting the two methods used, this chapter discusses the sample of editorials developed for the study.

### **Sample**

The study timeframe is from June 3, 2009 when President Obama, in a letter to Senator Edward Kennedy and Senator Max Baucus, stated, “I strongly believe that Americans should have the choice of a public health insurance option operating alongside private plans,” through December 24, 2009 when the Senate passed a version of healthcare reform that did not include the public option. Beginning with a major statement from President Obama, this timeframe represents a period when news coverage about the public option was high. Beginning in December 2009, news coverage about healthcare reform waned considerably. Although legislative discussion about the public option arose again in February 2010 when Senate Majority Leader Harry Reid considered including a public plan in the final healthcare reform act through reconciliation, arguments about the pros and cons of the public option had already been made.

All general circulation daily newspapers included in the databases America's Newspapers and LexisNexis were searched to discover editorials about the public option. Iyengar et al. (2005) found that local political reporting tended to be more substantial than that of national journalists, a trend that may extend to editorials. To help ensure that the editorials analyzed reflected local opinions, editorials from these national newspapers were excluded: USA Today, the Wall Street Journal, and the New York Times. A national sample was drawn to allow discussion about local newspaper editorials across the country as a whole as well as comparisons among different parts of the country.

However, some large circulation newspapers, particularly the Los Angeles Times and any newspaper owned by Gannett, such as the Nashville Tennessean, Des Moines Register, Cincinnati Inquirer, and Indianapolis Star, are not part of any newspaper databases. To help ensure national coverage, these five newspapers were searched using the newspapers' website archives. While four editorials about the public option were found on the Los Angeles Times website, only two editorials were found in the archives of the four Gannett newspapers tested. The researcher decided that this yield did not warrant additional special searching on Gannett newspaper websites.

The database search terms used were "public option," health, and editorial. The beginning date for the search was June 3, 2009, and the end date for the search was December 31, 2009 to capture commentary based on Senate action. All editorials published during the specified time period that mentioned the healthcare public option were purposively selected for the sample. Bylined opinion columns were excluded from the sample to ensure that the editorial represents the newspaper's point of view and not that of a single author. A final sample of 212 editorials was discovered. The unit of analysis was the



individual editorial. The approach used for the quantitative analysis of the sample is presented next followed by a section explaining the qualitative analysis method.

### **Quantitative Analysis**

This section first describes the process used to train an assistant coder, enter data, and test for reliability. Next, the analysis method used for each sub-question of RQ1 is described.

*Coders and intercoder reliability.* The researcher and one assistant, a college senior, did the coding. A training session on coding emphasized determining stance and entering data in the spreadsheet. The sample of editorials was divided between the two coders who entered all data needed to answer the three parts of RQ1 into spreadsheets. The coding instrument was an Excel spreadsheet set up by the researcher, which had the following variables: title of editorial, name of newspaper, city, state, date of publication, Census division, focus of editorial (yes=public option, no=other aspect of health reform), stance of editorial focused on the public option (supportive, oppositional, balanced), and presence of a link to local issues (yes or no) plus a column for notes about the type of local issue if yes. Once coding was completed, the two spreadsheets were merged. The descriptive data were imported to SPSS for crosstabs and frequencies.

To determine if the two coders were consistent in determining stance, both coders analyzed a random subsample of 22 editorials, about 10 percent of the sample. Reliability of coding was assessed using Holsti's method. Because the data are nominal with only three categories and only two coders were used, the method is appropriate for this study (Wimmer & Dominick, 2006). The intercoder reliability coefficient is .91, indicating a high level of reliability.

**Research question 1a.** Analysis that examined local newspaper editorials across the country as a whole as well as comparisons among regions was conducted to answer RQ1a. The grouping of newspaper editorials for regional analysis is based on the nine Census Bureau divisions of the United States. The Census Bureau states these divisions are intended to represent relatively homogeneous areas:

1. *New England Division: Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island and Vermont*
2. *Middle Atlantic Division: New Jersey, New York and Pennsylvania*
3. *South Atlantic Division: Delaware, Florida, Georgia, Maryland, North Carolina, South Carolina, Virginia and West Virginia*
4. *East South Central Division: Alabama, Kentucky, Mississippi and Tennessee*
5. *West South Central Division: Arkansas, Louisiana, Oklahoma and Texas*
6. *East North Central Division: Illinois, Indiana, Michigan, Ohio and Wisconsin*
7. *West North Central Division: Iowa, Kansas, Minnesota, Missouri, Nebraska, North Dakota and South Dakota*
8. *Mountain Division: Arizona, Colorado, Idaho, Montana, Nevada, New Mexico, Utah and Wyoming*
9. *Pacific Division: California, Oregon, Washington, Alaska and Hawaii*

**Research question 1b.** Editorials were first coded to determine whether or not the article focused on the public option or only mentioned the public option as part of a discussion on another aspect of healthcare reform. There are many ways to code content and useful examples were found in the literature in which tone or stance in an editorial was coded on a three-point scale such as positive, negative, or neutral (Borah, 2007; Landreville & LeGrange, 2007; and Siu, 2009). In this study, editorials about the public option were coded

as supportive, oppositional, or balanced. A balanced editorial was defined as one that does not take a stand but provides a two-sided view or a factual explanation of the public option.

**Research question 1c.** Each editorial was coded as no or yes as to whether a connection to a local issue was incorporated in the editorial. If yes, a brief explanation of the issue was noted in a column in the spreadsheet. These notes were reviewed and categorized to look for patterns in the type of local issue mentioned.

### **Qualitative Analysis**

This analysis began with the following list of concepts and themes about healthcare reform developed by Pew through a content analysis of websites of the three leading organizations on each side of the debate.<sup>1</sup>

For opponents of the plans, the top concepts and themes were:

1. *More taxes with healthcare reform*
2. *Rationing healthcare*
3. *More government involvement*

For supporters of the plans, the top concepts and themes were:

1. *More competition*
2. *Insuring pre-existing conditions*
3. *Greedy insurance industry (Project for Excellence in Journalism, 2010).*

These six concepts and themes underpinned the qualitative textual analysis and served as a starting point in the identification of frames. An important point of differentiation is that the frames identified by Pew were about healthcare reform in general, and this study focused on the public option specifically.

The qualitative textual analysis task for answering RQ2 was facilitated by MAXQDA content analysis software. The software was designed for qualitative social research, but contains quantitative features that make a content analysis task less confusing and

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<sup>1</sup> Oppositional organizations: Republican National Committee, Conservatives for Patients Rights, and

cumbersome. The researcher used the lexical search and MAXdicto functions of the software to identify the words used most frequently in the editorials and then to identify the number of editorials in which particular key words or phrases appear. Distinctive vocabularies are used to advance political agendas (Simon & Jerit, 2007); therefore, identifying word choices in editorials is essential to determining frames.

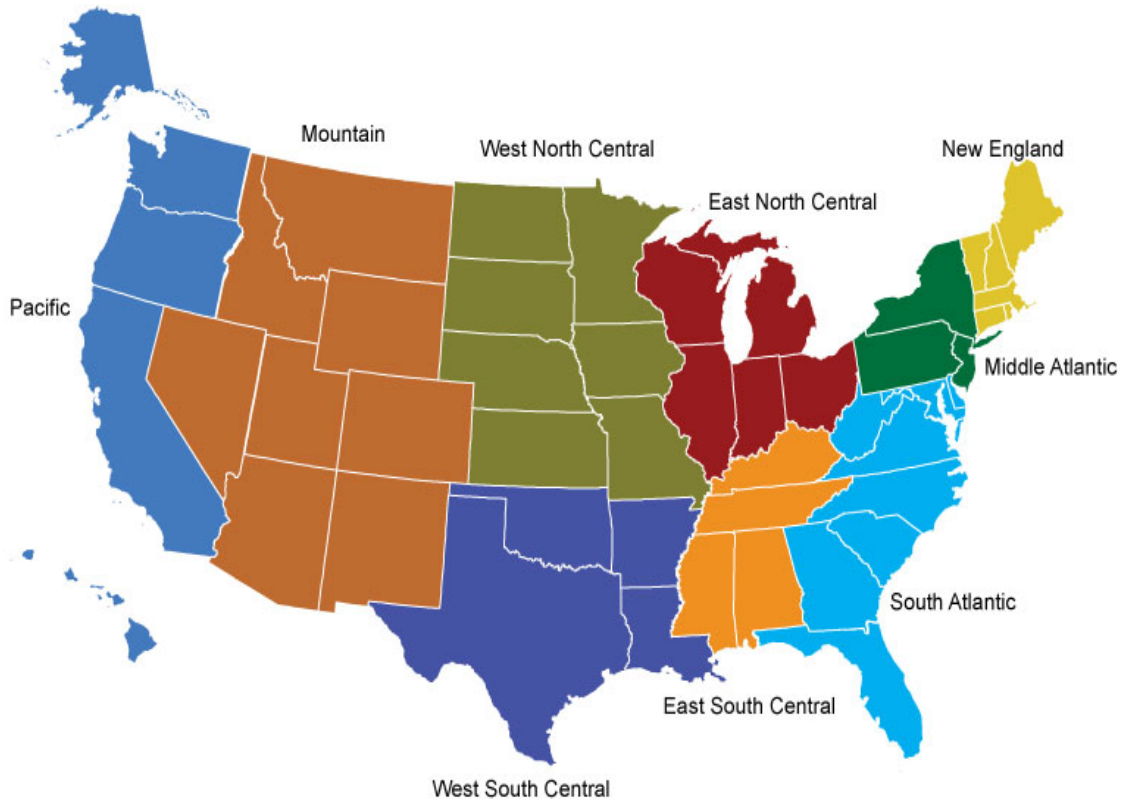
The researcher also used MAXQDA to identify the themes in editorial positions by highlighting particular text passages in each editorial and then assigning code names to each passage. These code names were developed using both the Pew list of themes and the key word/phrase list. Codes that were not found frequently were combined with other codes or eventually discarded to narrow the list and to develop themes. Argument is at the heart of editorial writing, but the richness of that argument is hidden when the analysis only determines the stance or topic (Boeyink, 1993; Carragee & Roefs, 2004). The most prevalent themes that emerged from the text were grouped according to the three value frames (social, ethical, and political) identified in the literature review. Thus, the purpose of the qualitative theme identification process was to take the analysis beyond a general quantitative description of content.

## Chapter Four

### Quantitative Analysis

This chapter presents data about where the sample of editorials about the public option was found, stance, and links to local issues to answer RQ1. As a visual reference for the rest of this chapter, the map below shows how the U.S. Census Bureau identifies divisions within the 50 states.

Figure 4.1  
*Map of the Nine U.S. Census Bureau Divisions*

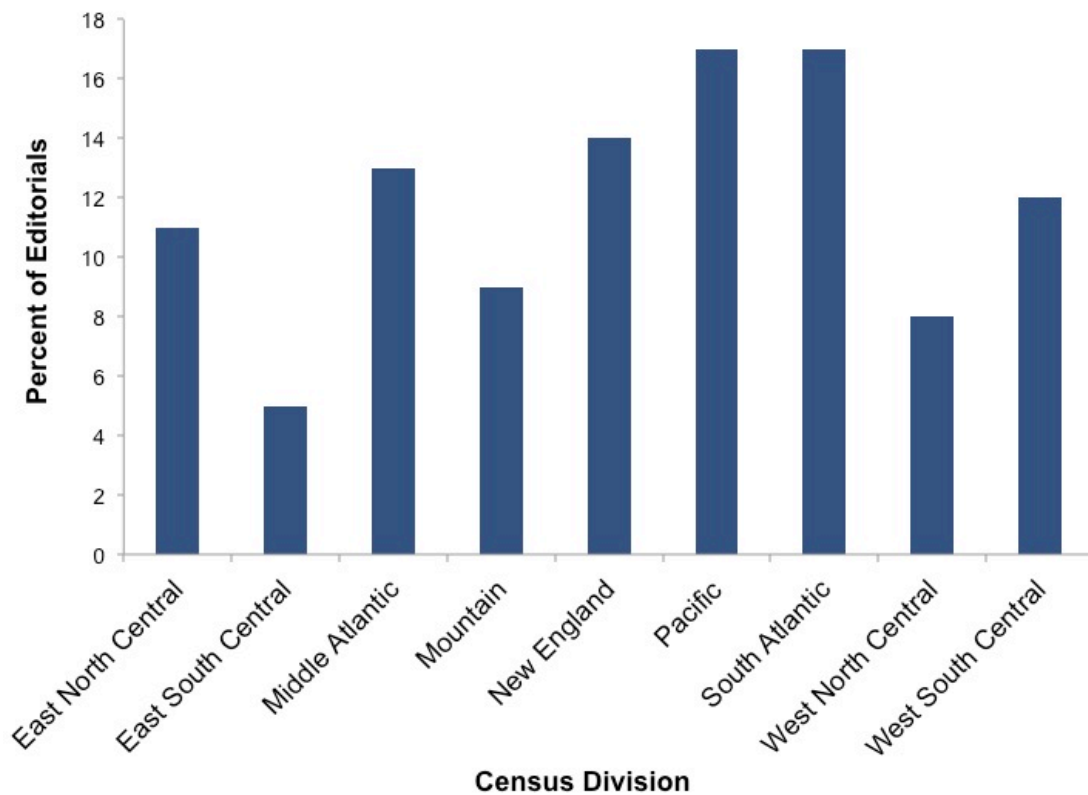


RQ1a asked where editorials mentioning the public option appeared and if there were regional differences or similarities. The regional comparisons woven throughout this chapter

were conducted for the distribution of the sample, stance of the editorials, and presence of links to local issues.

A total of 212 editorials that mentioned the public option were discovered. They were from all nine Census Bureau Divisions, 35 states and the District of Columbia, 67 cities, and 72 newspapers. Figure 4.2 shows the distribution by Census division of the sample of editorials.

Figure 4.2  
*Census Division Distribution of Editorials that Mentioned the Public Option*



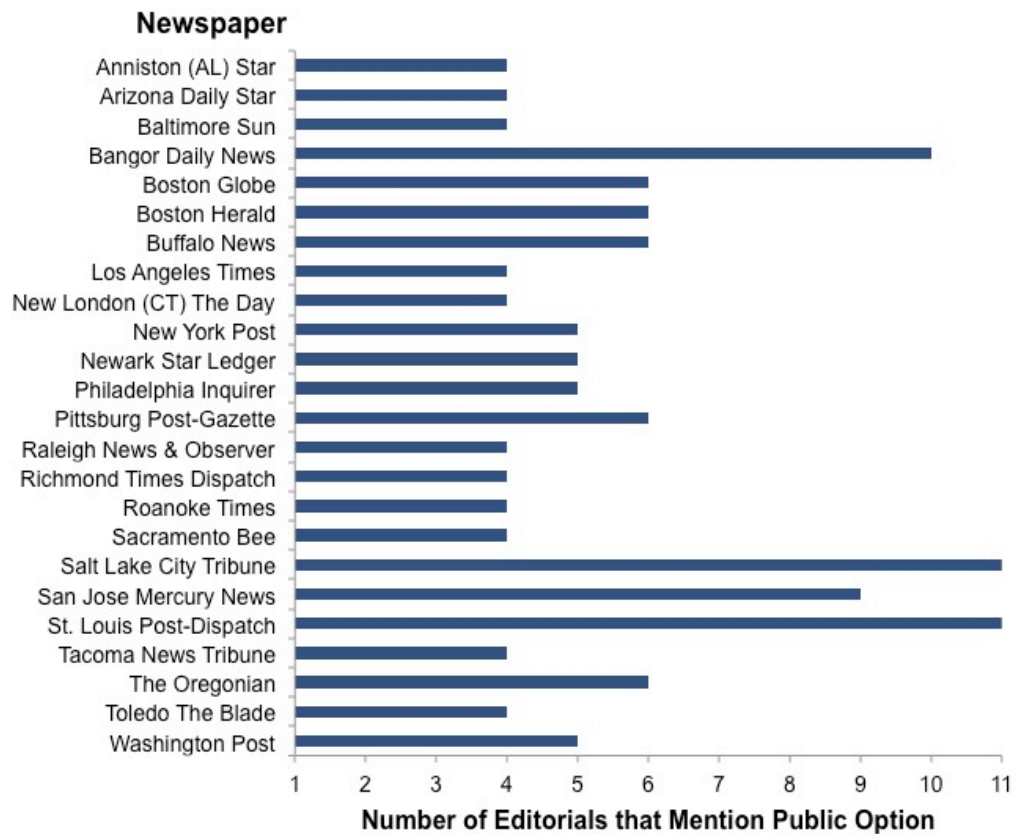
The most editorials were found in the Pacific and South Atlantic divisions, and the fewest in the East South Central division. The actual numbers of newspapers by Census division that wrote about the public option in institutional editorials are:

- 17 - South Atlantic

- 11 - East North Central
- 10 - Pacific
- 7 - West South Central
- 6 - Mountain
- 6 - New England
- 5 - Middle Atlantic
- 5 - West North Central
- 5 - East South Central

Figure 4.3 names the newspapers where editorials that mentioned the public option were most prevalent by listing those where four or more editorials were found.

Figure 4.3  
*Newspapers that Mentioned the Public Option in Editorials*



In Figure 4.3, of the 24 newspapers that published four or more editorials mentioning the public option, four newspapers published nine or more editorials. The other 48 newspapers in the sample published one to three editorials mentioning the public option. Of the total sample of 212 editorials, 174 (82%) editorials focused discussion on the public option (rather than

merely mentioning it), and these editorials were analyzed to determine stance. Next, answering RQ1b, data about the support, opposition or balance of editorials that focused on the public option are presented.

### Stance

Overall, of the 174 focused editorials, 62% supported the public option, 21% opposed it, and 17% remained balanced in the discussion. Figure 4.4 shows how newspapers editorialized about stance among the nine Census divisions.

Figure 4.4  
*Editorial Stance about the Public Option by Census Division*

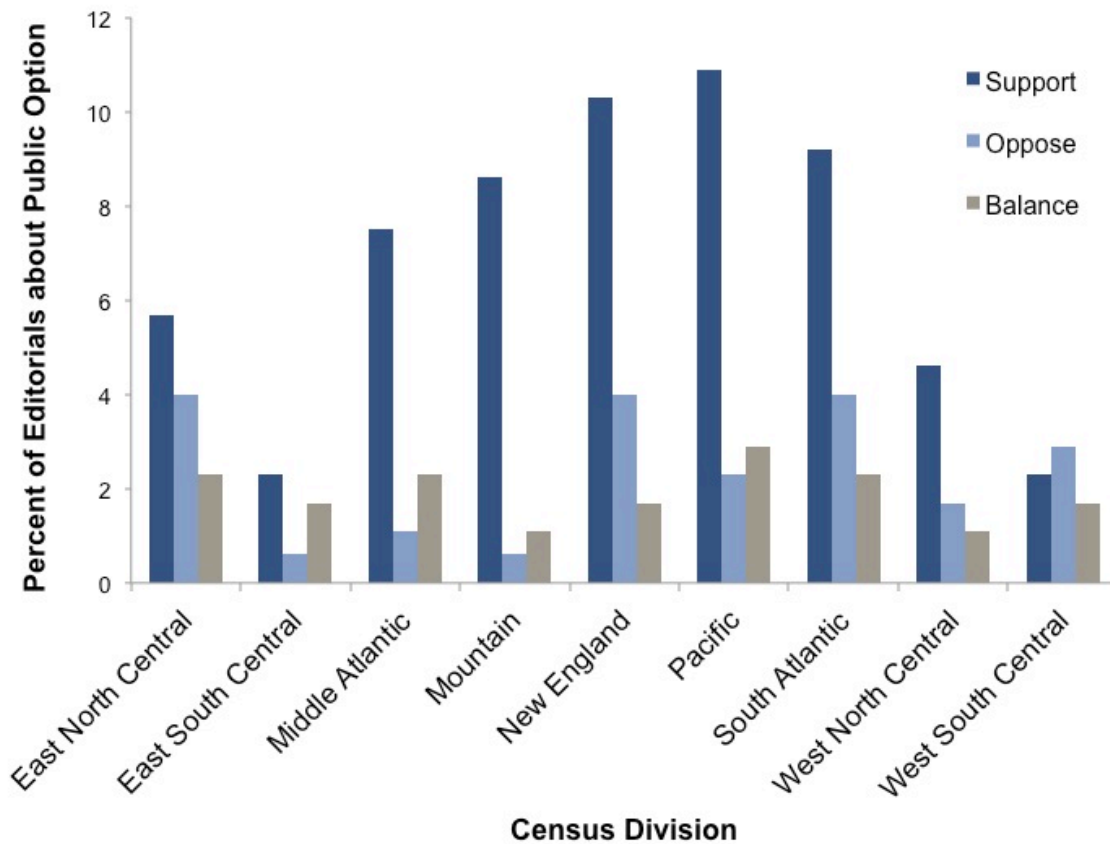


Figure 4.4. Newspaper editorial (N = 174) distribution of opinion by Census division. East North Central n = 21, East South Central n = 8, Middle Atlantic n = 19, Mountain n = 18, New England n = 28, Pacific n = 28, South Atlantic n = 27, West North Central n = 13, and



West South Central  $n = 12$ . A chi square calculation ( $df = 16$ ) indicated differences among the nine divisions were significant ( $p < .05$ ).

More editorials were supportive than opposed to the public option in all but one Census division, which was West South Central (Arkansas, Louisiana, Oklahoma and Texas). Aside from divisions, states with the strongest newspaper editorial support for the public option were Alabama, Arizona, California, Utah, Maine, Maryland, Missouri, Ohio, Pennsylvania and Florida. The strongest opposition was found in Nebraska and Oklahoma. Editorial opinion was mostly balanced or evenly divided between support and opposition in Texas, Wisconsin, Virginia, and Massachusetts. The statements and frames used in support or opposition to the public option will be presented in the next chapter.

Newspapers that published two or more editorials supporting the public option are:

- Akron (OH) Beacon Journal
- Anniston (AL) Star
- Arizona Daily Star - Tucson
- Baltimore Sun
- Bangor (ME) Daily News
- Boston Globe
- Buffalo News
- Charleston (WV) Gazette
- Chicago Sun-Times
- Decatur (AL) Daily
- Houston Chronicle
- Los Angeles Times
- Milwaukee Journal Sentinel
- New London (CT) Day
- Newark Star-Ledger
- Oregonian (Portland)
- Philadelphia Inquirer
- Pittsburg Post-Gazette
- Raleigh News & Observer
- Roanoke (VA) Times
- Sacramento Bee
- Salt Lake Tribune
- San Francisco Chronicle

- San Jose Mercury News
- St. Louis Post-Dispatch
- St. Petersburg Times
- The Blade - Toledo

Newspapers that published two or more editorials opposing the public option are:

- Boston Herald
- Dallas Morning News
- La Crosse (WI) Tribune
- Lewiston (ME) Sun Journal
- New York Post
- Omaha World Herald
- Richmond Times-Dispatch
- San Diego Union-Tribune
- Tacoma (WA) News Tribune
- The Oklahoman

The lists above give another view of where support or opposition for the public option was found. In addition to examining the stance of editorials and where those editorials were located, the study also looked at whether or not editorials discussed a local issue in conjunction with the public option or healthcare reform in general. Data about links to local issues are presented next to answer RQ1c.

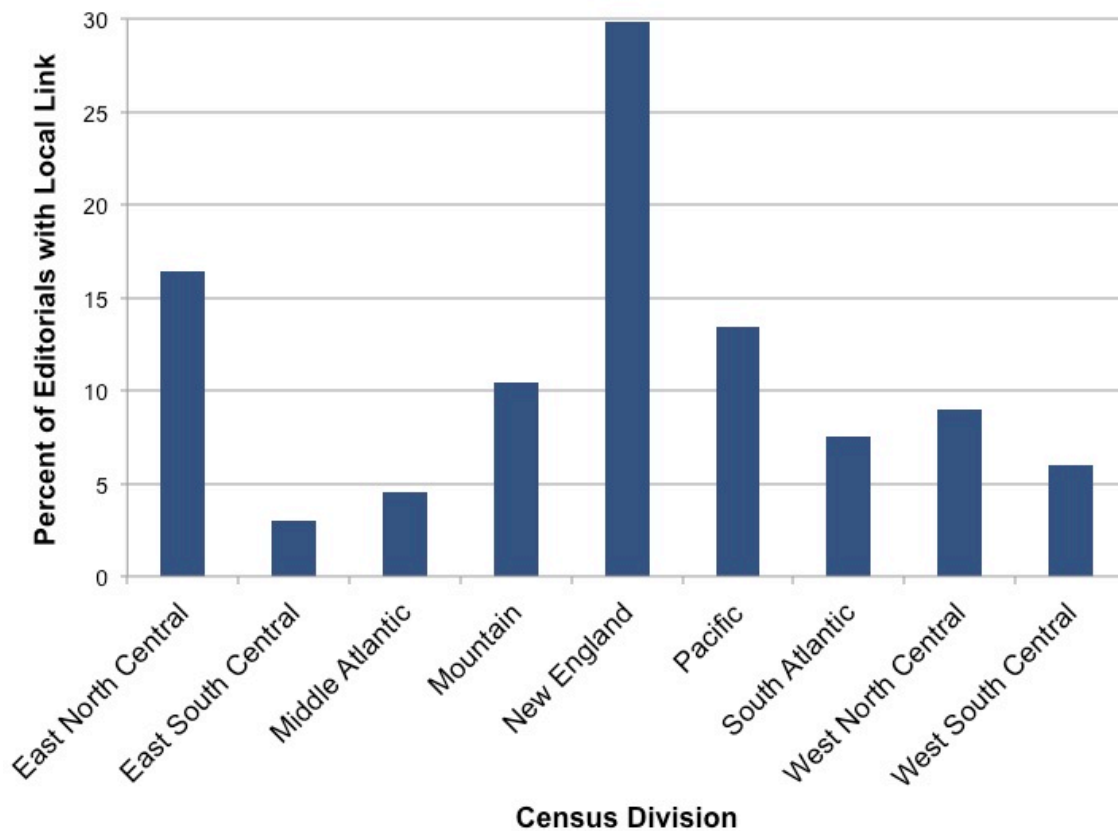
### **Links to Local Concerns**

Editorials can be important for explaining or connecting national to local issues. However, of the 174 editorials that focused on the public option, only 67 (39%) mentioned a local concern in the discussion. The types of concerns, in the list below, are presented as percentages of the 67 editorials with local links and are not mutually exclusive:

- Elected official's view (e.g., representative, senator or governor) - 57%
- State-run health systems including Medicare - 19%
- State's rate of uninsured people – 15%
- State/local business issue – 6%
- Cost of local health insurance – 6%
- Lack of competition among state health insurers – 4%
- Town hall meetings – 3%

Elected officials views were the most common local link. Only elected officials that represented the state in which the editorial was found were included in the above list. For example, if an editorial in Maine mentioned Senator Olympia Snowe it was included in the count, but if an editorial in Maine mentioned Senator Max Baucus of Montana, it was not included. Figure 4.5 shows the proportion among census divisions where editorial local links were found.

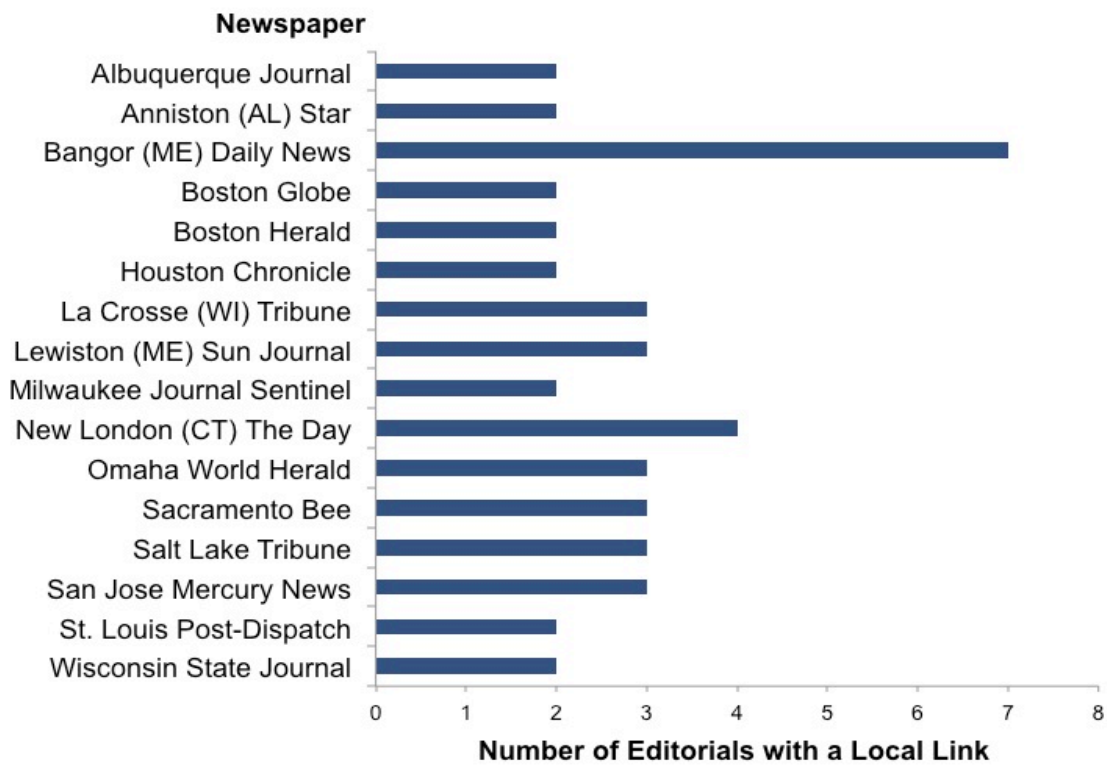
Figure 4.5  
*Census Divisions in which Editorials with Local Links Were Found*



Editorials about the public option in the New England division contained the most links to local issues, and these editorials were found in newspapers in Connecticut, Maine, and Massachusetts. In these states, the most prevalent topic was the position or vote by the state’s senator on healthcare reform. In the East North Central division, three different

Wisconsin newspapers mentioned various local concerns. Figure 4.6 names these newspapers and other newspapers that ran at least two editorials about the public option that also included mention of a local concern. Publishing two or more editorials implied that the connection of the public option to local concerns was deemed by the editorial board to warrant coverage more than once.

Figure 4.6  
*Newspapers with the Most Editorials that Mentioned Local Concerns*



In this study, almost 40% of editorials were found to have made connections between the national issue of the healthcare reform public option and local concerns. But, editors in all areas of the country, in 72 newspapers, chose to write about the public option signaling that this health policy issue was considered important to their communities. Because nearly two-thirds of editorials supported the public option, it was also mostly considered a beneficial policy option for localities.

The quantitative data in this chapter provide a backdrop about where editorials were found, the stance expressed in those editorials, how the different divisions of states compared to one another, and presence of local issues. The next chapter presents a qualitative analysis of the frames found in the editorial positions about the public option.

## **Chapter Five**

### **Qualitative Textual Analysis**

The intent of the second research question was to identify the dominant concepts and themes in editorial frames concerning the public option through a qualitative textual analysis. This identification process began by using MAXQDA content analysis software to search for key words or phrases in the editorials about the public option. Text passages in each editorial were then coded and grouped according to common concepts and themes. The three healthcare value frames—social, ethical, and political—identified in the Chapter Two literature review informed the analysis.

#### **Key Words**

A quantitative feature of MAXQDA qualitative content analysis software was employed to identify key words used frequently in the 174 editorials focusing on the public option. Finding key words or phrases was an important first step in the analysis, which is supported by the literature. Simon and Jerit (2007) determined that examining word choices used in text is a consistent and practical way to chart the presence of frames. The key word list helped classify content into categories to “unpack the arguments and ideologies” (Smith & Wakefield, 2005, p. 365) undertaken by editorial writers and to identify “the particular signature elements” (Gamson, 1989, p. 159) of frames. Words relevant to potential themes and categories that appeared most frequently were:

- Cost(s) – 142 editorials (82%)
- Medicare – 84 editorials (48%)
- Competition – 65 editorials (37%)
- Government-run – 60 editorials (35%)

- Market(s) – 51 editorials (29%)
- Pre-existing – 45 editorials (26%)
- Choice – 35 editorials (20%)
- Universal – 24 editorials (14%)

Although the key words found in the editorials are not value-laden on their own, the context in which they are used structures perceptions. This list became a reference for the qualitative frame identification in the editorials, which is described next.

### **Frame Identification**

To develop a list of themes, all editorials focusing on the public option were uploaded into the MAXQDA software and read by the researcher for coding. The code system began with the six predetermined Pew frames identified in Chapter Three. A free-style list of code names based on key words was also developed for themes discovered along the way.

MAXQDA allows the same passage of text to be coded with different names, so there was overlap in themes assigned to text passages by the researcher.

Identifying common themes among passages was the next step. Although each of the six Pew frames was found in the editorials, other frames were more prominent and became the focus of analysis. The frames found in public option editorials were compared to the social, ethical, and political value frames identified in the literature review, and these value frames became the scheme used to group the themes that emerged from the editorials. Using the three value frames as a guide, 800 text segments, which were sections of highlighted text from each editorial, were grouped as follows:

- Social – 326 text passages (41%)
- Ethical – 154 text passages (19%)
- Political – 320 text passages (40%)

Table 5.1 shows the central and supplementary themes of the value frames that emerged from the text.

Table 5.1  
*Value Frames and Themes about the Public Option*

<b>Value frame</b>	<b>Central theme</b>	<b>Supplementary themes</b>
Social	Cost control	More competition Citizen choice Bigger government
Ethical	Greediness	Private insurers prevail Bought and paid for Universal coverage
Political	Pure politics	Sensationalized statements Stiffen their spines No public option pragmatic

Text passage exemplars for discovered themes were reviewed, and summary statements were developed for each theme, which are provided next in Table 5.2.



Table 5.2  
*A Brief Description of the Arguments and Stance in Themes*

<b>Theme</b>	<b>Stance</b>
<b>Cost Control</b>	
More competition	Supportive. The public option would ensure competition with private insurers in markets where none exists and help control costs.
Citizen choice	Supportive. Looking at the popularity of Medicare, Americans like government-run healthcare and deserve the option of buying affordable health insurance, even if employers do not provide it.
Bigger government	Oppositional. The public doesn't trust government to work well, are unwilling to pay tax increases, and fear a government takeover of healthcare.
<b>Greediness</b>	
Private insurers prevail	Supportive. Health insurers, which ration healthcare by deciding what to pay for and who to cover, are focused on the bottom line and not quality health care for the public.
Bought and paid for	Supportive. Compromised lawmakers who get contributions from Big Medicine block the public option.
Universal coverage	Supportive. Too many Americans lack basic healthcare, but the public option would counter private interests by extending affordable, comprehensive coverage to all Americans and ban denial of coverage for pre-existing conditions.
<b>Pure Politics</b>	
Sensationalized statements	Supportive. Erroneous arguments confuse citizens about the public option.
Stiffen their spines	Supportive. Democrats in general, and Obama in particular, should stop letting Republicans define the debate and press on to pass meaningful reform.
No public option pragmatic	Oppositional. Legislative progress shouldn't hinge on the public option because healthcare reform goals can be accomplished even if the public option is not included.

Most editorials contained multiple themes, which were found in supportive, oppositional or balanced editorials. To provide more clarity and depth of explanation of the finer points of each theme, additional description and examples of text passages are provided in the next sections covering each of the three value frames.

### **Social Frame**

Controlling costs emerged as the overarching theme in the social frame. As indicated by the key word search, cost of healthcare was the most prevalent editorial concept overall, with the word “cost(s)” appearing in 82% of editorials. Competition and market are other frequently occurring words in the social frame. The concept of marketplace was central to the supportive citizen choice theme and the oppositional bigger government theme.

### **More Competition**

More competition is the most frequent supporting theme for controlling costs, and the most prominent theme among all frames. The word “competition” was found in 37% of editorials. In this supportive theme, the public option would ensure competition with private insurers in markets where none existed and help control healthcare costs. It is illustrated in the following:

*A large public insurance plan would have the clout to force providers to cut costs. It is plainly the best way to cover the uninsured at a reasonable price while also providing needed competition in places where one private insurer dominates the market.*

*- Boston Globe, September 6, 2009*

*We believe that the public option is a necessary ingredient of reform for the reasons that the president stated. It would help to provide a low-cost choice for people who can otherwise not afford insurance, and by competing with private insurers it would help to contain costs.*

*- The Salt Lake Tribune, September 10, 2009*

Prognostic framing, a type of framing associated with social movements, is used here. It diagnoses a problem (health insurance is too expensive) and proposes a solution (the public option would provide a low-cost choice for people who can't afford insurance) (Hallahan, 1999). Support for the public option is clearly indicated by the phrases “best way” and “necessary ingredient of reform.”

*We can think of no better way to help reduce costs than with a government-run public insurance option that has true bargaining power to tamp down prices while also providing real competition in many markets where none exists.*

*- Chicago Sun Times, September 10, 2009*

*The public option is designed to help control health care spending by serving as a competitive counterweight to higher health insurance premiums. Without it, there may not be enough in the reform bills to constrain spending - or premiums.*

*- St. Louis, Post Dispatch, October 4, 2009*

Supportive editorials viewed the public option as the best way to ensure competition in the healthcare market to foster cost control. Healthcare was considered citizens' societal right with availability determined collectively for the nation (Lau & Schlesinger, 2005). This collective concern would be best addressed socially through a mechanism designed to help control health insurance costs by injecting competition, specifically the public option, into the market. A national solution would ensure meeting the needs of all people. Equity, achieved through more market competition, is this theme's social value in that all people should be able to afford health insurance.

### **Citizen Choice**

Many editors believed the public option was a good idea because it would lead to greater citizen choice through market place competition. Choice, considered a desirable feature of the healthcare market, was mentioned in 20% of editorials, like these:

*...if individuals don't like their choice of private plans, they should be able to vote with their feet and choose a public option. Congress is well positioned to take up this debate -- with Senate proposals focused on a national exchange of private plans and House proposals focused on an exchange that includes both a public and private options. But in both bodies, they need to refocus the idea of choice to include all Americans.*

*- The Sacramento Bee, September 27, 2009*

*A public option would increase competition, lower costs and offer Americans more choice. Few individuals really have a choice of insurance plans now:*

*They take what their employers offer, if they're lucky enough to have benefits.*

*- San Jose Mercury News, October 2, 2009*

*In health care, it's all about choice....The committee's bill will be a disappointment if it fails to inject serious competition into the monopolistic private insurance markets that exist in too many states.*

*- The Oregonian, October 4, 2009.*

The idea of more citizen choice is meant to be appealing, especially to people who have few or no choices for healthcare. But, the concept of acquiring an ambiguous gain, such as more choice, may not be effective in a situation of uncertainty. As discussed further in the next section, people take greater risks to avoid losses than to obtain gains (Hallahan, 1999). In this case, the gain of more choice, meant to be a supportive argument, is not well defined.

*Despite the confusion -- many attendees refused to accept that Medicare is run by the government -- their defense of the program shows that the government can run a health care system to the liking of many Americans. Government can also run it more efficiently -- Medicare's administrative costs are much lower than those of private insurance companies -- while allowing people to choose their own doctors. So, let government, through a public option, compete with private insurers and let the public decide which it prefers. Currently, those under 65 have little choice and are paying too much for too little -- a system no one should defend.*

*- Bangor Daily News, September 2, 2009*

Medicare, whether as a model for good-government or as an example of failed government, was mentioned in nearly half of all editorials about the public option. Some editors suggested that the Medicare program, as an example of good-government healthcare, would be an appropriate model on which to base the public option plan to offer more

healthcare insurance choice to citizens. The segment above is from a supportive editorial that also calls out the nonsensical notion that Medicare is not a government-sponsored healthcare program, a point of confusion that arose during public meetings held during the late summer of 2009. This editorial believed that a good-government option for healthcare offered potential for increasing citizen choice, especially among people who otherwise had little or no choice in the health insurance market.

### **Bigger Government**

Centered on the idea that the Democratic-backed public option would result in more taxes, bureaucratic costs and government control over healthcare, this theme ran counter to the citizen choice theme that government healthcare, particularly as provided through Medicare, is efficiently operated and popular. A big government frame was also employed to work against President Clinton's health reform plans, and it was successful because it hardened the boundaries between sides in the debate (Pan & Kosicki, 2001). In this study, bigger government emerged as the most prevalent theme found in editorials opposing the public option.

Oppositional editorials using the bigger government theme decried a supposed plot by Democrats for a government takeover of healthcare. Other editorials suggested that murky details and signals that the public option would be based on the problematic Medicare program proved that the option was an unworkable solution for healthcare reform. Some editors also discussed reliance on the free market for solutions to healthcare problems. The following passages illustrate the bigger government theme:

*The mistrust that many feel about a public option -- a program administered by the government that would compete with private insurers -- is the government itself. Name one big government program, critics say, that works well and is cost-effective.*

- Frederick, News Post, August 26, 2009

*And reform should rely on the free market as much as possible, while recognizing it has some limitations in serving people who need prompt care. In no event should there be an expansion of coverage if we cannot figure out how to pay for it.... Obama would ram this shadowy proposal through, promising to extend health care coverage to all Americans and at a lesser cost to them. Does he want the impossible?*

- The Tampa Tribune, July 19, 2009

Prospect theory suggests that frames with a central idea of risk or potential loss are advantageous in acceptance by the media (Hallahan, 1999). The words “mistrust” and “shadowy proposal” certainly convey risk of the unknown in the above passages. The next passage expresses the possibility of an existing government healthcare plan running out of funds to indicate potential public financial loss based on more government expense.

*But that frustration would pale next to the one future generations would experience if they get stuck paying for another unaffordable public health plan. Medicare's hospital trust fund goes dry in less than a decade; huge savings or payroll tax hikes will be needed to salvage it. Do we really want to add another public plan on top of the one going bankrupt?*

- Dallas Morning News, October 15, 2009

More government on top of “bankrupt” government was a nonstarter. While oppositional editors repeatedly stated that government programs did not work well and should not be trusted, they tended to sidestep the issue of private industry effectiveness. Editors did not give a rationale for why private insurers should be trusted.

*Democrats said a public option would keep private carriers honest and drive down costs, but there was little evidence it would work that way. Instead, it more resembled the first incremental step toward a government takeover of the entire health care system.*

- The Oklahoman, October 28, 2009

The idea of government takeover in the bigger government theme represents a loss of individual freedom to choose healthcare insurance in the market. People are risk averse, and a frame that presents the prospect of a loss has advantage over one that presents prospect of a

gain (Hallahan, 1999). However, these editorial writers did not consider the fact that many Americans do not have an affordable choice in the health insurance market. Editorials that suggested the free market could be relied on to provide solutions, like the next passage, did not offer specific details on how those solutions would be implemented.

*Instead of a new government program, the primary focus should be on creating a more competitive private insurance market that serves everyone...  
- Wisconsin State Journal, October 6, 2009*

The market place concept was important to editors, with the term market occurring in 29% of editorials, both supportive and oppositional. Value frames tend to portray policy debates as conflicts with each side countering on the basis of basic principles (Lee et al., 2008). To editors, a basic principle in healthcare reform is that market competition is desirable. In this social frame of controlling costs, proponents argued that more market competition through government intervention would control insurance costs leading to greater citizen choice. Opponents argued that the free market should be relied upon to control healthcare costs and that more government would lead to a takeover of healthcare. Responsibility, from either the federal government or the private market, for solving healthcare competition and cost control problems is the social value in contention between the differing points of view in the citizen choice and bigger government themes.

### **Ethical Frame**

The ethical framing of controversial issues tends to polarize how people view those issues (Shah et al., 2001). Greediness is the overarching theme in the ethical frame and the reason many Americans lack insurance. Polarization against the health insurance industry is reflected in the two concepts of private insurers excessively concerned about profit and lawmakers that cater to business interests over the societal problem of uninsured citizens.

Countering greediness, supportive editors considered healthcare to be a societal right with the goal being universal coverage, the third supplementary theme in this frame.

### **Private Insurers Prevail**

The private insurers prevail theme expresses the editorial opinion that for-profit health insurers have been allowed to decide at will what procedures to pay for and who to cover resulting in a form of healthcare rationing. Editors decried private insurers' focus on bottom-line results over the provision of healthcare for people who lacked it, as depicted in these excerpts:

*What is also mostly myth is that the current system is somehow inherently more virtuous than alternatives, including the public option now being discussed by federal policymakers and the Obama administration. As Steffy notes, "Health insurers long ago stopped being concerned with quality of care. They answer to their shareholders."*  
- *Houston Chronicle, June 19, 2009*

*Count us among those who believe a public option is the right choice. It is urgently needed to provide meaningful competition for the private insurers, which in recent years have become unresponsive corporate monoliths more focused on their bottom lines than Americans' crying need for affordable, effective health care.*  
- *Houston Chronicle, October 30, 2009*

The words "right choice" argue for what should be done. The ethical aspect of this theme is amplified by describing the choice as "urgently needed" and based on a "crying need" for reform.

*Finally, there is this annoying fact that opponents often overlook: There is rationing now. Insurers decide what to pay for and who to cover. By banning the ability to deny coverage for pre-existing conditions, for example, there would be less rationing under health care reform.*  
- *Milwaukee, Journal Sentinel, August 16, 2009*

Pre-existing conditions were mentioned in more than a quarter of editorials. Health insurance coverage discrimination was also a concern during the 1993-1994 healthcare reform debate,



but had heightened prominence in 2009. Editors viewed profit-motive led practices of not covering pre-existing conditions and other forms of corporate healthcare rationing as resulting in an unbalanced market.

*That's a lot of money sloshing around in the big bureaucratic, top-heavy, for-profit insurance industry, which spends too large a chunk of its revenue on claim denials, policy cancellation investigations, and exorbitant executive salaries and perks.*

*- Chattanooga, Times Free Press, June 28, 2009*

*The health insurance companies claim that the world will end if Congress includes a government option in the comprehensive health reform bill. We do not share the insurers' apocalyptic vision, and judging by the polls, neither do the American people. What might end is the insurance companies' ability to game the system in the name of unlimited profits.*

*- The Salt Lake Tribune, June 29, 2009*

*When an insurance company says an 11 percent increase in its rates -- during a recession -- is too small, it is clear that the health care system has lost its way. Health care must be about patients and medical treatment, not corporate profits.*

*- Bangor Daily News, October 10, 2009*

By stating that the healthcare “system has lost its way,” the editor makes an explicit argument that treating healthcare solely as a marketable commodity is wrong. This ethical frame is concerned with the moral fairness of private insurers’ focus on profits over patients. The next segment also calls attention to government distrust and market concerns from the perspective of private insurers as found in the bigger government theme.

*Echoing the complaints from insurers, who say the government can't be trusted to compete fairly, conservatives say the so-called public option would drive private insurers out of the market...*

*- Los Angeles Times, August 9, 2009*

And, it alludes to how industry talking points were simply mimicked by political opponents of the public option. Continuing the political echo concept, the next theme concerns

politicians opposed to the public option who took money and marching orders directly from private interests.

### **Bought and Paid For**

In addition to calling out what many editors considered unethical business practices because they were unjustifiably profit-driven, editorials also discussed members of Congress who received large campaign contributions from health insurers. Several prominent members of Congress were recipients of large contributions from the healthcare industry. These particular lawmakers were singled out for legislatively blocking the public option and catering to the desires of private industry over affordable, adequate healthcare for citizens.

*The president already knows the bought-and-paid-for lawmakers -- Republicans and Democrats -- who are standing in front of serious solutions to the crisis of U.S. health care.  
- Anniston Star, September 9, 2009*

The implication here is that certain lawmakers made a choice to obstruct “serious solutions” to healthcare reform because they accepted substantial campaign contributions from opposing groups. As such, lawmakers could make a compromised choice to block reform or a good choice that solves a common “crisis.” Campaign donations and home-state industry influence were mentioned frequently in editorials with the bought and paid for theme.

*It's worth noting that insurance companies have contributed nearly \$1.2 million to Mr. Baucus' campaign committee and Leadership PAC in the current election cycle. That's just a small part of the \$6.4 million in contributions he has received so far from health care-related industries.  
- St. Louis, Post-Dispatch, September 18, 2009*

*A public option has been seen as a poison pill by senators from states that are home to big insurance firms, not least independent Joe Lieberman of Connecticut.  
- Boston Globe, December 10, 2009*

Discovered through a key word search, the senators who opposed the public option mentioned the most in editorials were Olympia Snowe (R-Maine), Max Baucus (D-Montana) and Joseph Lieberman (I-Connecticut). Two of these senators are from states in New England, which was found to be the census division with the most links to local issues in editorials about the public option. Baucus and Lieberman were called out in editorials for being too cozy with the insurance industry, but they eventually voted for the Affordable Care Act once the public option was off the table. Snowe, who also received considerable contributions from health professionals and insurance companies, was the only Republican to hint that she might vote in favor of healthcare reform with certain conditions. However, she ultimately voted against the Affordable Care Act. As shown in Chapter Four, the Bangor Daily News, located in Snowe's state, wrote about the public option in 10 editorials, seven of which had a link to a local issue. The editorials were supportive of the public option, contrary to Snowe's position.

### **Universal Coverage**

In addition to questioning health insurance business practices and political patronage, supporters incorporating an ethical frame also focused attention on the number of people across the country or in their state who were uninsured. Ending denial of coverage for pre-existing conditions, a practice abhorred by editors, is a closely related goal because it would be necessary to achieve universal coverage. The following segments illustrate this theme:

*About 50 million Americans are uninsured. Almost 66 million could be uninsured within 10 years, analysts for the nonpartisan Robert Wood Johnson Foundation have estimated. Middle-class families would be hardest hit. That's what's at stake in the debate over a so-called public health insurance option.*  
- St. Louis, Post-Dispatch, August 23, 2009

*... insurers cherry-pick younger, healthier consumers and dump others, or prohibitively raise premiums, when renewals come up. That's why health care*

*reform proposals in Congress include a "public option" to provide competition and requirements that insurers extend coverage to all.*  
- New London, *The Day*, November 24, 2009

The values of benevolence and universalism, which counter greediness, were frequently found in a study of newspaper opinion articles about health policy issues (Hoffman & Slater, 2007). The ethical framing of issues, such as advocating for universal coverage, is important because it has been found to shift how individuals view issues typically understood in economic terms to being more connected with moral principles (Shah et al., 2001). Additionally, ethical value frames have been shown to shape audience reasoning because they provide an easily accessible guide for understanding complex policy issues (Lee et al., 2008). The ethical value frame was not dominant in the editorials analyzed, but nevertheless played a major role in arguments. Editors discussing the public option used the ethical values of moral fairness and a human right to healthcare to highlight what they viewed as greediness among industry and political actors. Political value frames are described next.

### **Political Frame**

The central theme of pure politics in the political value frame is concerned with erroneous statements by political players, Democratic effectiveness in the policy arena, and the realities of legislative negotiation. A key phrase in this frame was “government-run,” which was used both by proponents as a neutral program descriptor and by opponents as a way to mock the public option. This frame is about the game of politics rather than the substance of policy proposals or the ethics of stakeholders.

## Sensationalized Statements

The most prevalent supporting theme under pure politics is sensationalized statements, which was found in both supportive and a few balanced editorials. This theme reflects political infighting and maneuvering to have the public option rejected by Congress. Supportive editorials using this theme worked to dispel rumors and lies about healthcare reform and the public option, as in these examples:

*Opponents of the public plan have a curious logic - they say on the one hand that it would be so attractive to consumers and businesses that it would drive private insurers out of business, but that it would be so terrible at delivering health care that no one would want it. If a government competitor in the health insurance industry provides better care at lower cost, what's wrong with that?*

*- Baltimore Sun, August 18, 2009*

*Competing interests in this process try to spin the arguments, scaring Americans who aren't paying close attention with words like "socialism" and "rationing." Health care in the United States is already rationed - it's done with money. People who can afford good health care pay for it, and those at the bottom of the income scale can access publicly funded health systems. But those who make too much, but not quite enough, are left out. This group feels the effects of American-style rationing already; 20 percent of Arizonans are uninsured, and of those, 73 percent belong to families with at least one full-time worker, according to the U.S. Census.*

*- Arizona Daily Star, July 9, 2009*

Attributes of the uninsured in Arizona are accentuated to show that working class families are most likely to lack access to healthcare. The reality is that people who work may not have health insurance through their employer and may not be able to afford to buy insurance in the private market. One major function of newspaper commentary is clarification (Hendrickson & Hale, 2004), as evidenced by these editorials.

In the next two editorial excerpts, the complex issue of healthcare reform is distilled to how one side of the political debate provokes the other. Political maneuvering, not policy reasoning, is the focus of these editorials.

*The attitude of Republican lawmakers was plainly evident in their boorish behavior, which included one House member calling the president a liar, a new disgrace even in this season of angry partisanship. Despite the pretense of having viable alternatives, the Party of No is dug in waiting for Mr. Obama's Waterloo and will be of no help.*  
- Pittsburgh, Post Gazette, September 11, 2009

*As discouraging as it was to watch certain members of the Senate Finance Committee treat the concept of affordable health insurance coverage as America's own Bolshevik Revolution last week, hope for a modicum of common sense in the U.S. Congress springs eternal. The battle over the public option isn't over yet, as there is at least one more card to play.*  
- Baltimore Sun, October 4, 2009

A few editorials used a reasoned tone to provide balance in their discussion about the public option while also dispelling the more egregious claims about healthcare reform. Here are two examples:

*There are nuggets of plausible potentiality in some of these assertions. A "public option" insurance plan, for example, might eventually socialize health care financing if it were subsidized by tax dollars and allowed to undercut competing private plans.... Proponents of the public option insist that it would be self-financed, not subsidized. But the fact that so many proponents would actually prefer an all-government single-payer system leaves room for honest suspicion. Still, denouncing moderate reformers as "socialists" is absurd and malicious.... We're not sure which is the more discouraging thought: that some believe Congress has hidden "death panels" in a health reform bill - or that they know it hasn't but are still insisting it has. The death panel fabrication is merely the worst of the distortions - many originating with fire-breathing, Obama-loathing conservatives - that have plagued what ought to be a thoughtful, factual conversation about health insurance in America.*  
- Tacoma Tribune, August 19, 2009

*Fear of such an option is irrational. On one hand we have opponents saying a government plan would be dreadful – a bureaucracy with all the compassion of the Internal Revenue Service and all the efficiency of the U.S. Postal Service. Then some of the same critics turn around and warn that the public option would be so wildly popular it would drive private insurers out of business. So which would the government plan be? Dreadful or wildly popular? One of these predictions of doom has to be wrong, and it's most likely that both of them are.*  
- The Oregonian, October 4, 2009

These passages attempted to correct unfair characterizations. The editors highlighted distortions on both sides of the debate to say that the public option plan was not as promising or inauspicious as either side promoted.

### **Stiffen Their Spines**

Some editors supportive of the public option were apparently irritated by what they saw as ineffective pushback by Democrats on detractors of the public option. Closely related to, but still differentiated from, the political conflict characteristic of sensationalized statements is the theme Democrats need to stiffen their spines. Editors called on Democrats to stay strong in their resolve for the public option and for President Obama to live up to his campaign promise of implementing a government insurance option to compete with private plans.

*Neither chamber, though, is starting with talk of a single-payer system, having conceded that fight before it began. Now, Republicans and conservative Democrats want to start negotiations by eliminating the public option? Put single-payer on the table and begin again. Democrats need to stiffen their spines.*

*-Roanoke Times, June 24, 2009*

Some editors believed one reason the public option did not gain stronger traction was that President Obama did not explain and argue for it enough. The administration alternately advocated for and backed away from the public option resulting in calls by supportive editors for more consistent advocacy, as depicted in this segment:

*What is going on in Washington? How did the Obama administration manage to let its perfectly reasonable health care reform principles - cost containment and a public option for health insurance - get snowed under a blizzard of "death panel" lies and incoherent shouts at town hall meetings? Particularly galling is the administration's now-you-see-it, now-you-don't approach to the "public option." President Obama campaigned on the fact that having a strong, government-run health insurance program to compete alongside private insurers is the best way to expand coverage for the 47 million Americans who lack it.*

*-San Francisco, The Chronicle, August 20, 2009*

This editorial also includes the sensational statements theme. Far-fetched attacks, such as a claim that proposed legislation contained a “death panel” as mentioned above, were a leading topic in cable television news coverage. Editorials mentioned those attacks in an attempt to diminish their strength. Democrats were called upon to maintain political pressure in support of the public option. However, editorials did not call upon citizens to act in support of the option.

*They [Democrats] should maintain the pressure. The public option would offer the best chance of delivering what should be the bottom-line goal of any reform plan: affordable coverage for Americans who now lack basic health care.*

*-San Francisco, The Chronicle, October 11, 2009*

*At the end of the day, conservatives will always consider it "a government-run health-care plan," no matter what is done to make it otherwise. That being true, it would be better for the Democrats to show some spine and do what has to be done...*

*- Toledo, The Blade, October 26, 2009*

The term “government-run” appeared in 60 editorials, both oppositional and supportive. In the above passage, quotes highlight the derisive way opponents used government-run to dismiss the public option. And, in the passage below, the term is used in a more neutral way to describe the public option as a desirable program actually run by government.

*President Obama has hinted that he might abandon the idea of a government-run health insurance plan. But he shouldn't, unless a strong alternative emerges in Congress. For months, Obama has been advocating a so-called "public option" as part of health-insurance reform. It describes a government-run plan that would compete with private insurers to help keep the cost of premiums down.*

*- Philadelphia Inquirer, August 24, 2009*



## No Public Option is Pragmatic

Subtle shifts in message frames have been found to influence political outcomes (Shah et al., 2001). Political themes about the public option changed as different legislative proposals were accepted or rejected and the debate evolved. In particular, from late summer through fall of 2009, editorials proposed not including the public option as part of the final healthcare bill as the most pragmatic way to ensure enacting some reform instead of having a total legislative failure. Although the public option was part of the healthcare reform package passed by the U.S. House of Representatives, the U.S. Senate did not have the votes necessary for inclusion of the public option in its package. Editors did not want to see healthcare reform fail because of a political fight over the public option, and they discussed alternatives that could still achieve broad coverage of citizens. Democrats previously urged to stiffen their spines were told by some editors to work toward other major elements of reform and let the public option go, as evidenced by these passages:

*But under the proposed reforms, even without a public option, insurance companies would have to agree to cover people regardless of their health status.*

*- The Washington Post, August 20, 2009*

*In our view, a government-sponsored plan might be the cleanest, surest way to inject some much-needed competition into the insurance market. But, if the same can be accomplished through a different mechanism that could get the extra votes, then fine. The progressive wing of the Democratic Party should avoid clinging irrationally to the notion that any health care overhaul in America must include a Medicare-style "public option" to succeed.*

*- The Oregonian, September 13, 2009*

Issuing a wake-up to progressives to stop “clinging irrationally” to the public option, this editor saw that the political battle was over, but a worthwhile healthcare reform package was still possible. The next editorial is also essentially speaking to progressive Democrats when it

urges Congress to pay attention to a package of reform and not just the singular idea of the public option.

*If there is one idea that could cause reform to stall between the House and Senate (where 60 votes are likely needed), it is the option. On this point, there must be negotiation. If the coming debate in the Senate hinges on the public option, the possibility exists that all of reform could come crashing down. Congress must pay attention to the much bigger picture, which is passing the most complete, innovative package of reforms as politically possible.*  
- Lewiston, Sun Journal, November 10, 2009

*The public option was to be the means to open access to health care for as many Americans as possible and to ensure adequate benefits at affordable rates. The Senate has an opportunity to prove that the public option isn't the sole means to the goal.*  
- Akron, Beacon Journal, December 11, 2009

One of the ways journalists, and by implication editorial writers, construct policy debates is through the language of pragmatics (Shah et al., 2001), which was the case seen in these editorials about the public option. Collective decisions, such as those made through a legislature, must emphasize shared values to achieve unity (Ruger, 2007). And, even though Americans express a general concern for others, they have not yet agreed on values that relate to healthcare reform (Ruger, 2007). The shared American values of individualism and equal opportunity were both used by opposing sides of the public option policy debate.

## **Chapter Six**

### **Discussion and Conclusion**

Editorials, important indicators of the media's point of view, communicate messages about controversial issues to the general public, stakeholders, and lawmakers. This study demonstrates that newspaper editors in all regions of the United States considered the public option proposal for healthcare reform worthy of commentary, although there was more coverage in states on the east and west coasts than in the middle of the country. The analysis of institutional editorials found that, overall, 62% of editorials supported the public option, 21% opposed it, and 17% remained balanced in their discussion.

This study sought to distill editorial arguments by examining value frames. Social, ethical, and political values applicable to the public option guided frame identification. Frames concerning the substance of policy proposals, the ethics of stakeholders, and the game of politics emerged from the editorials. Cost control, greediness, and pure politics were the primary themes within those frames. Cost control was the aspect associated with the public option that resonated the most with newspaper editors overall.

Editorials are not the forum for elaborating on detailed policy propositions but do provide an outlet for expressing broad societal goals and outlines of sound solutions. Newspaper editorials in this study contained both policy substance and simplified politics in their opinions. The social and ethical frames considered healthcare provision remedies and societal rights while the political frame was concerned with characterizations, drama, and strategy about the public option. Supporting previous findings about healthcare reform

failures (Ruger, 2007), roadblocks to the public option's inclusion in the final healthcare reform law included political tactics, strong interest group opposition, and Congressional policy-making strategies. All of these factors were evident in the analyzed editorials.

The public option debate was political with divergent perspectives about individual freedom and responsibility for the provision of health insurance, as this synopsis suggests:

*The public option seems to have an infinite capacity to inspire arguments.*  
- Tacoma News Tribune, November 6, 2009

In the social theme of bigger government, which was the most prominent negative frame, oppositional editors repeatedly stated that government should not be trusted, but did not provide reasons for why private industry, on the other hand, should be trusted. In the ethical theme of greediness, supportive editorials essentially said that private industry should not be trusted because the profit motive harmed the obtainment of a societal right to universal health insurance coverage.

The Obama administration equivocated on the exact nature of its proposal about the public option, apparently in an effort to be mindful of the public's aversion to big government. This sensitivity was well founded because a big government frame successfully hindered President Clinton's attempt at healthcare reform. However, because of the Obama equivocation, there was no discursive basis for supporters to mount a sharply focused and energized campaign in support of the public option and they "lost frame potency" (Pan & Kosicki, 2001, p. 53) against the bigger government frame in much the same way Clinton supporters did about healthcare reform. Political actors win a policy debate by framing the issue to their advantage (Jerit, 2008).

Although there was public support as evidenced by opinion polls, a coherent widespread debate among supporters for the public option did not materialize. And, even

though nearly two-thirds of editorials supported the public option and urged lawmakers to be supportive, editors made few localized statements about why the public option was important to citizens in their communities. Editors did not call upon their communities for collective action in support of the legislative proposal. The following passage summarizes this circumstance:

*Unless their constituents demand them, lawmakers won't push for contentious changes in such a vital part of the U.S. economy [healthcare].*  
- *Los Angeles Times, August 9, 2009*

Similar to prior attempts at health reform, editorial adversaries promoted the ideas of distrust of government, threats to individualism, and that the private sector is more efficient than government. The political promotion of these oppositional ideas without effective pushback from supporters helped thwart the public option from becoming part of the final health care reform act.

### **Limitations**

The results presented in this thesis are subject to several limitations. First, the sample of newspapers has a limiting factor in that Gannett-owned newspapers were not readily accessible. Gannett is the largest newspaper company by circulation. The researcher searched several larger Gannett papers directly from website archives, but was only successful in identifying two editorials for two newspapers, and combing through more newspapers seemed futile considering time constraints. Nevertheless, using top newspaper databases, this study identified a robust sample of editorials from all regions of the country.

Second, although content analysis is a powerful and useful media research technique, it imposes certain constraints on the interpretation of research findings. Content analysis cannot provide information sufficient “to distinguish between the media leading the public

and the media anticipating public demands” (Bovitz et al., 2002, p. 129). It is also not sufficient for making claims about motives, the meaning people will derive from messages, or message effects (Landreville & LeGrange, 2007). Additionally, because policy issue frames evolve over time (Chong & Druckman, 2007), the frames identified in this study are only relevant to the time period specified.

### **Implications for Future Research**

The goal of this study was to contribute to the scholarship of understanding about the portrayal of a pivotal health policy proposal in newspaper editorials, which may inform future public affairs communication. The findings add to existing knowledge about how the public option resonated with the media during 2009. Future research could examine how or if value framing in editorials affects the public’s knowledge or opinions. A project could also look at links between value framing in editorials and political action or civic engagement by the public.

This study did not find as many links to local issues as anticipated based on the literature review. More research could be done to examine localization such as evaluating whether framing in editorials about legislative issues potentially influenced elected lawmakers. For example, the Bangor, Maine, newspaper published 10 editorials mentioning the public option, most of which were directly supportive. Maine’s Senator Snowe was the only Republican to waver in opposition to the public option. Future research could scrutinize links between substantial and sustained editorial opinion and the actions or opinions expressed by particular lawmakers. The study developed a rich data set that could be explored further by examining actions and public statements by influential people or organizations at the time particular editorials were published. A follow-up project could

examine the same editorials to see if the opinions expressed were reactive or proactive based on circumstances at the time they were published.

### **Conclusion**

From the Democrats perspective, this excerpt offers the main points of the public option debate:

*Forget all the angry shouting about socialized medicine and government takeovers. Health care reform is really all about markets, competition and choice.*

*- St. Louis, Post-Dispatch, October 18, 2009*

But, government takeover has consistently been a successful frame with the media and the public even though the reality is that private interests have actually compromised individual choice and freedom in the healthcare market. Other countries have tried to expand private sector insurance through enhanced public financing without success in improving access to healthcare (Waitzkin, 2010). Expansion of private insurance has often generated additional expenses for citizens. On the other hand, properly designed, universal health insurance offers the best way to curb health insurance costs, as is the experience of industrialized countries that provide it (Starr, 1992).

Focusing on continued losses to individuals that would occur without the public option might have been a more successful framing strategy for progressive policy advocates. For those who opposed the public option, the takeaway is that a bigger government theme was again effective, similar to previous attempts at healthcare reform. As evidenced by oppositional editorials, the public option may have failed in 2009 because it was a proxy for too-much-government during a period of stimulus spending, bank and auto company bailouts, and growing budget deficits.

Healthcare reform tinkering will continue, and the public health insurance option concept as a legislative proposal is likely to be revisited as it has been on and off for the last 100 years. A criticism of the Affordable Care Act is that it does not do enough to contain costs. Many economists, such as Robert Reich (2009), believed that the public option was essential to healthcare reform because it would inject competition into a difficult-to-control healthcare payment system. Reich suggested that competition from the public plan would encourage efficiency and affordability in private plans, and private plans would encourage more flexibility in the public plan.

The question of how people will pay for healthcare coverage remains and may erupt just before the mandate to purchase individual coverage starts in 2014. In some states where only one private plan dominates, there will be no service or cost competition. In a couple of years, the time may be right for progressives to reintroduce a public insurance concept.

Successful political action largely depends on recognizing the components of an effective rhetorical strategy. The prevalence of support for the public option within editorials should be encouraging for political progressives who still would like to see a healthcare reform public option enacted. From an agenda-setting perspective, this positive coverage provides support for continued policy action. Progressive advocates of healthcare reform may find this assessment of how the public option was portrayed in editorial frames useful for forming improved messages and information subsidies around future healthcare proposals in what is likely to be an ongoing health policy debate.



## Appendix

### List of Newspapers in the Study by U.S. Census Division

#### **East North Central (IL, IN, OH, MI, WI)**

Akron Beacon Journal  
Chicago Sun-Times  
Columbus Dispatch  
Dayton Daily News  
Detroit News  
Grand Rapids (WI) Press  
La Crosse (WI) Tribune  
Lima (OH) News  
Milwaukee Journal Sentinel  
The Blade - Toledo  
Wisconsin State Journal

#### **East South Central (AL, KY, MS, TN)**

Anniston (AL) Star  
Chattanooga Times/Free Press  
Decatur (AL) Daily  
Knoxville News-Sentinel  
The Tennessean - Nashville

#### **Middle Atlantic (NJ, NY, PA)**

Buffalo News  
New York Post  
Philadelphia Inquirer  
Pittsburg Post-Gazette  
Star Ledger - Newark

#### **Mountain Division (AZ, CO, ID, MT, NM, NV, UT, WY)**

Albuquerque Journal  
Arizona Daily Star - Tucson  
Las Vegas Review-Journal  
Lewiston (ID) Morning Tribune  
Salt Lake City Tribune  
Standard Examiner - Ogden

#### **New England (CT, MA, ME, NH, RI, VT)**

Bangor Daily News  
Boston Globe  
Boston Herald  
Cape Cod Times  
Sun Journal – Lewiston  
The Day – New London

**Pacific (AK, CA, HI, OR, WA)**

Fresno Bee  
Los Angeles Times  
Merced (CA) Sun Star  
News Tribune – Tacoma  
Sacramento Bee  
San Diego Union Tribune  
San Francisco Chronicle  
San Jose Mercury News  
Seattle Times  
The Oregonian – Portland

**South Atlantic (DE, FL, GA, MD, NC, SC, VA, WV)**

Augusta (GA) Chronicle  
Charleston (WV) Gazette  
Dominion Post – Morgantown, WV  
Frederick (MD) News-Post  
Free Lance Star – Fredericksburg, VA  
News & Observer – Raleigh, NC  
Orlando Sentinel  
Palm Beach Post  
Post & Courier – Charleston, SC  
Richmond Times-Dispatch  
St. Petersburg (FL) Times  
Tampa Tribune  
The Sun - Baltimore  
Washington Post

**West North Central (IA, KS, MN, MO, ND, NE, SD)**

American News – Aberdeen, SD  
Bemidji (MN) Pioneer  
Des Moines Register  
Omaha World-Herald  
St. Louis Post Dispatch

**West South Central (AR, LA, OK, TX)**

Austin American Statesman  
Dallas Morning News  
Democrat-Gazette - Little Rock  
Houston Chronicle  
The Oklahoman  
Tulsa World  
Valley Morning Star – Harlingen, TX

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