

POLICY OR POLITICS: A CONTENT ANALYSIS OF HOW THE NETWORK NIGHTLY
NEWS COVERED THE 2009-2010 HEALTH CARE ISSUE.

by

LEANN WINTER

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Approved by:

Major Professor
Dr. William Schenck-Hamlin

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ABSTRACT

Many critics and scholars (e.g. Lippman, 1927, Putnam, 2000, Entman, 1989, McChesney, 2004, Funigiello, 2005), have argued that news media coverage of major political affairs and policy often fails to provide citizens with the information they need to engage in these issues in a thoughtful manner. The style of news utilized by networks as well as choices in framing have been found to have a significant impact on what is covered and how audiences perceive coverage (Bennett, 2005, Patterson, 2000, Prior, 2003, Zaller, 2003, Cappella & Jamieson, 1997, Ibrahim, 2010, T Riet et al., 2009, Bizer & Petty, 2005, Ben-Porath & Shaker, 2010, Domke & Shah, 1995, and Esposito, 1996). According to the PEW Foundation (2010) a large portion of the 2009-2010 healthcare coverage focused on politics and not how the healthcare system functions (policy).

This paper explores the coverage of the 2009-2010 health care issue by the Network Nightly News through the use of a content analysis. For the purpose of this study, the proposed method of Budge et al. (2001) political party platform categories were used to code the content of the broadcast. These 46 codes contained issues that dealt with the policy of health care and the politics surrounding healthcare, as well as positive vs. negative framing. 30 broadcasts were randomly chosen, one day for each month, from the three nightly news networks during the ten months of highest coverage. Each broadcast was divided into "quasi-sentences", where each sentence was broken down into individual actions. Results illustrate the frequency between policy and political content, and positive and negative content surrounding the 2009-2010 health care issue.

KEYWORDS: Framing, Policy, Politics, Health Care Reform, Network Nightly News, Content Analysis, Quasi-Sentence

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Chapter 1-Introduction

News coverage of healthcare reform has never been a neutral and passive process. Audiences are told what to think about and how to think about it (Funigiello, 2005, p. 302, Iyengar & Kinder, 1987). Funigiello (2005) explains that the media initially framed the Clinton administration's healthcare proposal "as a way to provide comprehensive reform of the entire health system" (p. 302). It then switched from focusing on the support for the plan to concentrating on the secrecy behind the plan to finally drawing attention to debates surrounding health care reform (Funigiello, 2005). Very little attention was devoted to the actual policies of Clinton's healthcare reform plan.

These assertions by Funigiello (2005) that the media "have encouraged a structure of public discourse that favored simple ideas over complex ones and the status quo over change" (p. 302), bring us to the objective of this study; exploring the content of the news coverage of Obama's health care reform plan.

In 2009-2010, the healthcare issue filled more of the newshole than any other topic that year. According to the PEW Foundation it was "the leading subject in the mainstream news media," accounting for 13.9% of the newshole between June 1, 2009- March 31, 2010. Going as high as 27% in March, 2010 when the bill was near passing in Congress (PEJ, 2010; Six Things to Know About Health Care Coverage, p.3). Despite the healthcare issue being the top story in the news media, viewers complained of increased confusion with the increase in coverage. Based on surveys performed by the PEW Research Foundation, "a solid majority of Americans consistently said the health care debate was hard to understand- a number that increased from 63% in July 2009 to 69% in December" (PEJ, 2010; Six Things to Know About Health Care

Coverage, p.1). If news stations were spending a good chunk of their coverage on the healthcare issue, what occurred in the coverage that resulted in so much confusion?

The news media is described as the “4th branch of government” because of its influence in the framing of the content of major political issues (Farnsworth & Lichter, 2003, p. 1). The influence of the news media and its resulting impact has been a topic of constant debate and study for decades. In the last 30 years, communication scholars have established that the news media falls under the rhetorical umbrella, that it is not an objective and impartial source of information. One reason that the news so shrewdly appeared as a detached deliverer of information is the high level of ethos afforded them. Hart and Daughton (2005) make the claim that, “the rhetoric of the news, then, is a rhetoric of authority, with news institutions constantly making bids of preeminence” (p. 200). This occurs because more and more news channels put much of their focus on political analysts and experts to facilitate audiences in deconstructing the messages of politicians and political leaders. “Kenski (1996) suggests that TV news influences not only which issues we focus on, but what standards we use to judge governments, officials, and policies” (c.r. Hart and Daughton (2005), p. 200). Through this method the news media constructs an image that they are “an independent source of political authority” (Hart and Daughton, 2005, p. 200). The technique of fashioning its own credibility while concealing its persuasive approach at the same time has cause critics and communications scholars to analyze the content the news media produces. Hart and Daughton (2005) list four attributes or rhetorical strategies that support the dialectic image. First is that news is “present-focused” and not interested in reflecting or considering a historical perspective. Second, is that the news is “undertheorized.” In other words, “it reports only ‘the facts’ and thus seems more trustworthy” than other types of rhetoric (p. 202). Third is that the news is “calibrated.” Networks are trying to

sell a product and manipulate coverage and stories to touch a particular audience. Finally, the news is “fantastic.” This tactic is meant to increase the pathos in news coverage by focusing on sensational stories, creating popular attitudes and ideas from nothing. The idea of “public opinion” only exists when “a writer labels a particular set of attitudes as popular” (Hart and Daughton, 2005, p. 202). Through choices of framing and marketing strategies the news media is unmistakably a “rich source of persuasion” (Hart and Daughton, 2005, p. 201), which makes their coverage of major political and policy issues important to study.

Given that healthcare impacts nearly every American and “represents about one-sixth of the U.S. economy (PEJ, 2010, Six Thing to Know About Health Care Coverage, p. 1) validates it as a major policy issue. The fact that in 2009, 45 million people under the age of 65 lacked health insurance (Congressional Budget Office, 2010, “Selected CBO Publications Related to Health Care Legislation, 2009-2010”) is one of the reasons politicians and others want to solve the problems occurring in the healthcare system. The healthcare system was established during the Depression as a way for hospitals to fill beds and increase their revenues (Aaron & Burman, 2008). However, over the last few decades health care has evolved into a program available to a wide variety of Americans helping to improve and extend their lives (Congressional Budget Office, 2010, “Selected CBO Publications Related to Health Care Legislation, 2009-2010”). Health insurance programs were developed in response to the increase in demands of medical care, which were followed by the expansion of coverage to the government programs of Medicare and Medicaid (Aaron & Burman, 2008). The exponential growth of the healthcare system has provided an excellent resource for Americans and their medical knowledge and needs but at the same time has become financially out of reach for many.

“Health care spending has grown much faster than the economy as a whole (Congressional Budget Office, 2010, “Selected CBO Publications Related to Health Care Legislation, 2009-2010” p. 287). Americans are finding it more difficult to pay for health care coverage because for decades the premiums have been increasing at a faster rate than income growth (Aaron & Burman, 2008). In 2009, premiums on an employment-based plan averaged \$5,000 a year for a single and \$13,000 a year for a family (Congressional Budget Office, 2010, “Selected CBO Publications Related to Health Care Legislation, 2009-2010” p. 289). According to the BCBS of Kansas, 2011 enrollment plan the cost of health care coverage per month ranged between \$500 a month to more than \$1500. These high prices are becoming a severe strain for the budget of many American households (Aaron & Burman, 2008). In most cases premiums may not even cover expenses such as specific doctors or treatments, certain medications, dental coverage, vision coverage etc. but only major medical emergencies and routine doctor’s visits. Consequently, the cost of healthcare coverage for the young and healthy bears more weight than the risk of possibly needing it. And if the cost of healthcare coverage continues to increase at the rate it has the past few decades it was projected that in 2019 the number of uninsured would increase to 54 million (Congressional Budget Office, 2010, “Selected CBO Publications Related to Health Care Legislation, 2009-2010”).

Health care is provided to Americans through employment-based programs, private coverage, Medicare, or Medicaid. According to Aaron & Burman (2008), in the 2008 U.S. health payment system, “premiums for employer-sponsored insurance (ESI) are excluded from both income and payroll taxes. The self-employed may deduct their premiums from income tax but not payroll taxes. But people who cannot get health insurance at work must pay their premiums out of after-tax income” (p. 2). In other words, the greater benefit is to get healthcare coverage

through employers. The down side, however, is that this usually results in lower wages (Congressional Budget Office, 2010, “Selected CBO Publications Related to Health Care Legislation, 2009-2010”).

The cost of health care is not only a rising dilemma for Americans but it also “represents the single greatest challenge to balancing the federal budget” (Congressional Budget Office, 2010, “Selected CBO Publications Related to Health Care Legislation, 2009-2010” p. 293). Programs such as Medicare and Medicaid continue to draw a considerable portion of financing from the government. “Under current policies, CBO projects, federal spending on Medicare and Medicaid will increase from about 5 percent of gross domestic product (GDP) in 2009 to more than 6 percent in 2019 and about 12 percent by 2050” (Congressional Budget Office, 2010, “Selected CBO Publications Related to Health Care Legislation, 2009-2010”, p. 287). This increase also impacts Americans who are getting healthcare coverage through employers or the private sector because doctors and hospitals are expected to provide treatment to those without coverage. According to Kenneth McLennan and Jack A. Meyer (1989), “the cost of charity care and bad debts [are] passed along to private-sector buyers through higher charges” (p. 13).

Steady cost increases as well as the rise in Americans without health insurance has made the topic of reforming the health system “politically salient, consistently ranking among the top three issues in public opinion polls, along with the Iraq War and the economy” (Aaron & Burman, 2008, p.1). Yet even with the increase in interest and the sizable influence that healthcare has on American citizens and the economy, most know little about how the systems works and the media coverage on the topic prior to 2009 “accounted for less than 1% of the overall coverage (PEJ, 2010, Six Things to Know About Health Care Coverage, p. 1). However, the increase in news media coverage on the 2009-2010 health care issue left much to be desired.

According to the PEW Foundation (2010) a large portion of the healthcare coverage focused on politics and not how the healthcare system functions. In fact, “the dominating thread of the coverage was the horserace aspect,” comprising of 41% of all the coverage, while 23% of coverage looked at the descriptions of different healthcare plans (PEJ, 2010, *Six Things to Know About Health Care Coverage*, p. 10). Concentrating on the horserace corresponded with scare tactic vocabulary. The most frequent terms heard from the news media when discussing healthcare comprised of “government run health care,” “government takeover,” “tax increases,” “rationed” and “death panels” (PEJ, 2010, *Six Things to Know About Health Care Coverage*, p. 8). A few terms supporting government controlled healthcare were used, but their frequency doesn’t nearly compare with the negative ones.

By this account, the healthcare issue was treated as a topic of debate by the news media not a matter of policy. These choices in framing “may have contributed to the public’s confusion on the issue” (PEJ, 2010, *Six Things to Know About Health Care Coverage*, p. 10). This study will analyze and categorize the healthcare coverage into themes of policy and politics by the *Network Nightly News*. The deconstruction of the *Network Nightly News* coverage will reveal how they framed the content of the healthcare issue and possible results of this framing.

Recent studies have shown that the *Network Nightly News*, which has the largest total viewership per day, has been in a steady decline for the past 30 years. According to the PEW Foundation, nightly news viewership in 2009 dropped 2.5 % from the previous year making the total drop of viewers since 1980 around 30 million (PEW Research Center’s *Project for Excellence in Journalism*, 2010). And yet they continue to have the largest audiences for news coverage and “also control many of the alternative news outlets on cable, where material from the evening newscasts can be recycled for cable news programming” (Farnsworth & Lichter,

2003, p. 26). Meaning that even though the Internet, talk radio, and cable news shows have been on the rise, the information that they use is supplied by the networks and is therefore the same material found on the networks news. This awareness of the present situation of the Network Nightly News is somewhat concerning when they are providing Americans coverage on substantial issues, such as election coverage, the war on terror, and the healthcare issue.

In order to fully understand how the network nightly news stations covered the healthcare issues a content analysis network nightly news stations will be performed. A stratified random sample will be used to collect a representative sample of healthcare coverage of the three major network nightly news stations; ABC, CBS, and NBC. Broadcasts will be broken down into quasi-sentences and each unit coded into predetermined thematic categories of policy or politics. The frequencies of each theme and categories will then be used to establish the essence of the coverage.

Chapter 2-Literature Review

“Across the entire span of the twentieth century, all attempts to enact a health care reform plan that would guarantee universal coverage have been defeated”(Quadagno, J., 2005, p. 201). In 1917, legislation for free medical care, death benefits, and paid sick leave for workers was introduced to fourteen states (Daschle et al., 2008). But by 1918 it had been defeated from pressure by physicians who feared fee regulations, and insurance companies who were concerned with the fate of private insurance companies if the government became involved (Daschle et al., 2008). By the 1930’s the Depression hit, which caused another push to create a national healthcare plan. “In 1934 President Franklin Roosevelt launched the Committee on Economic Security to craft the Social Security Act” (Daschle et al., 2008, p. 49). The initial bill included a national health care plan but after pressure Roosevelt left it out of the final bill (Daschle et al., 2008). In the 1940’s President Truman resolved to deal with the fact that millions of Americans were without health insurance. However, by the 1950’s the plan was discontinued and at the same time companies and unions were making deals with private insurance companies to provide coverage for their employees (Daschle et al., 2008). The ratification of Medicare in 1965 was “the largest expansion of health-care coverage in American history” (Daschle et al., 2008, p. 62), but it fell short of what most people wanted. Over the next four decades many national health care plans would meet the same fate as those before them.

Jill Quadagno (2005) proposes five reasons why the United States went so long without having a National Health care plan; antistatist values, weak labor, racial politics, state structures and policy legacies, and stake holder mobilization. The fear of the government being too involved in the personal lives and choices is a major theme surrounding a health care plan offered by the government.

According to Quadagno (2005), antistatist values “have fueled every proposal for government-financed health care services” (p. 202). The concern of big government and government control is central to the health care debate. The rhetoric focuses on this issue because it tends to be more dramatic causing the strongest response. Quadagno (2005) claims that this occurs from the different “interests groups vying for power” (p. 203).

The second issue that prevented a government health care plan was weak labor. Even though some companies and unions provide health care options, many do not. Many unions argued certain policy decisions. Some believed that they should “negotiate better wages”, while others felt that “unions could work with government to create a European-style corporate state” (Quadagno, 2005, p. 203). This disagreement on approach prevented the unions from influencing the progress of a universal government health care plan.

Racial politics has been another factor influencing health care. According to Quadagno (2005), “from the New Deal until the 1960’s, southern politicians did conspire with conservative Republicans to block national health insurance” (p. 204). The politics surrounding race continue with much of the rhetoric surrounding welfare and other social programs. Most suggesting that certain minority groups are “undeserving” (Quadagno, 2005, p. 204).

State structures and policy legacies are another explanation as to why universal health care was delayed for several decades. The same interest groups vying for power due to the “antistatist values” discussed earlier also promote a financing system that discourages universal health care. For example, “Medicare created a senior citizens’ movement that was subsequently primed to oppose any benefit cuts or tax increases, or that the financing mechanism in Medicare gave the hospital industry a vested interest in opposing subsequent efforts to impose price controls” (Quadagno, 2005, p. 205).

Stakeholder mobilization has also prevented universal healthcare from being established. It is obvious to see that the powerful who have an interest in preventing a universal health care take whatever measures necessary to keep it from occurring. Quadagno (2005) asserts that the “antireform coalition was led by physicians, who feared that government financing of medical services would lead to government control of medical practice” (p. 205). When the AMA decreased their push the insurance companies increased theirs. This prevented the stakeholder mobilization from being the leading obstacle to a national health plan (Quadagno, 2005).

Healthcare reform in this country has not only failed due to antistatist values, weak labor, racial politics, state structures and policy legacies, and stake holder mobilization. But according to Philip Funigiello (2005), “Overcoming these obstacles has proven to be so difficult and the historical record of failed reform so dismal that many reformers, policy experts, and lawmakers have argued that without a transformation of the political system, it is simply not possible to establish a system of universal health care in this country” (p. 299). In his book *Chronic Politics: Health Care Security from FDR to George W. Bush*, Funigiello explains in detail the transformation of healthcare in America over the past century. The last chapter in his book, “Unfinished Business”, outlines the reasons behind the struggle to pass legislation due to the structure, nature, and approach of three different groups; (1) Congress. According to Funigiello (2005), not only does the present structure of congress makes it difficult for the executive branch to have the backing of their respective party, but “maintaining the unity of health care majorities” (Funigiello, 2005, p. 300) is difficult because of the independent nature of each member of congress because the internal power in Congress is scattered between multiple committees and subcommittee lines. (2) The Middle Class. The middle class historically has viewed universal health care coverage as going against their core values and beliefs. To them universal coverage

encourages individuals profiting off of others hard work. According to Funigiello (2005), universal coverage to middle-class American's "rewarded the wrong behavior and the wrong people- those who had not contributed to employer health plans" (p. 303). This perception of universal coverage stemmed from a lack of understanding of different policies and options of healthcare reform and from a fear of losing what they already had (Funigiello, 2005). (3) The Media.

News Media Coverage

Past research has uncovered two key techniques practiced by the news media that influences the content of news stories. First involves the style of news reporting. News stories are classified by scholars as either soft news or hard news (Bennet, 2005, Baum & Jamison, 2006, Patterson, 2000, Prior, 2003, Iyengar & Kinder, 1987, Zaller, 2003). These two stylistic choices impact the type of information that is covered in a news broadcast and are important to analyze when considering news content. Broadcast framing is the second technique that scholars and previous studies claim has an impact on the content of news coverage (Cappella & Jamieson, 1997, Ibrahim, 2010, 'T Riet et al., 2009, Bizer et al. 2011, Ben-Porath & Shaker, 2010, Domke & Shah, 1995, Esposito, 1996). It is necessary to evaluate the process of framing because it directs what news coverage focuses on, as well as what they leave out, which influences the content of the message.

Soft News vs. Hard News

Dramatic, attention-grabbing narratives along with cheap, opportune "life-style stories" that play on the audiences emotions, are what Bennett (2005) calls "soft news". Soft news are stories that focus on dramatic personal stories and are strictly for entertainment purposes (Baum & Jamison, 2006). Hard news is defined by Patterson (2000) as the "coverage of breaking events

involving top leaders, major issues, or significant disruptions in the routines of daily life” (cr. Baum & Jamison, 2006, p. 947) or what Bennett (2005) calls “serious political reporting” (p. 23) News media outlets tend to mix these two types of news styles. However, as of late, more soft news is being offered (Baum & Jamison, 2006). There is less hard news and more soft news, and there is less reporting about government and politics and more about social chaos and personal drama (Bennett, 2005). The desire to increase ratings and profits may have something to do with this trend.

Many scholars have debated the benefits of hard news versus soft news. Prior (2003) examined whether people’s entertainment preferences had a direct impact on the style of news they preferred. The results of his study revealed that “soft news [was] popular among light news viewers who devote very little time to hard news and spend most of their viewing hours following programming other than news” (Prior, 2003, p. 154). With the knowledge that individuals who mainly watch television for entertainment choose soft news as their favored format, Prior turned his study to the political knowledge found in soft news. With soft news focusing mostly on scandals, personal stories, and opinions it seems that it would be unable to inform citizens on political affairs. Prior (2003) found that viewers of soft news did not convert information about politics discussed in soft news into learning. In fact, “people who prefer soft news formats are significantly less knowledgeable than those who prefer hard news, even in the political domains most easily presented as entertainment” (Prior, 2003, p. 162).

In 1987, Iyengar & Kinder examine the effects of agenda-setting by news stations. One aspect they looked at was the impact that “vivid cases,” which they defined as “personalized, case history information” (p. 35). They found that including these types of stories did not impact the audiences understanding of the issue in question. In fact, “under certain circumstances, vivid

cases may actually diminish the capacity of the news to influence the public's political priorities" (Iyengar & Kinder, 1987). They concluded that using vivid cases provokes the viewers to concentrate more on the action and agents so much that relating it to the national condition is very difficult. "Overwhelmed by concrete details, they miss the general point." (Iyengar & Kinder, 1987). In other words, the content in these types of news stories created no understanding of the issues.

These results, however, do not insinuate that the news media should discontinue the production of soft news. Clearly, it is the method in which many American's prefer to receive the news. It does suggest, however, that when major political issues arise and it is essential for citizens to have understanding of these issues that the news media should strive to keep them in the hard news format.

Soft news may not make viewers more knowledgeable or give them proper understanding on major political issues. But is it an ineffective form of news, meaning that citizen who watch soft news don't have the information needed to participate? According to Zaller (2003), "the question of news quality is whether news provides a sufficiently rich and engaging ratio of political information to make democracy work" (p.111, cr. Baum & Jamison, 2006, p. 947). Baum and Jamison (2006) set out to discover what effect that consuming soft news vs. hard news had on individuals who were highly politically aware, or individuals who are very interested in politics and public affairs. These results were contrasted with how consuming soft news vs. hard news impacted individuals who were politically unaware, or those who pay little attention to politics and political affairs (Baum & Jamison, 2006). At the completion of the study, Baum & Jamison (2006) found that individuals who were politically unaware did acquire some information of worth. In fact, for these "low-awareness individuals, even a relatively small

increase in information may enhance the ability of low-awareness voters” (Baum & Jamison, p. 958). In other words, any news is better than no news when trying to make a decision on big issues, such as deciding which candidate best fits their own interest.

Other election coverage studies have found that the news media are failing voters because they do not supply them with the type of information they need in order to participate. Studies have revealed that the news media’s coverage of political campaigns “produces little to nothing in the way of substance for viewers about the presidential campaign” (Patterson & McClure, 1976, cf. Dautrich & Hartley, 1999, p. 113). In fact much of the newshole given to election coverage focuses on the horse race and scandal coverage, not issues of significance (Farnsworth & Lichter, 2003). News reporting concentrates on who is ahead and behind in the polls and character issues rather than matters of policy and platform agendas.

In 1983, Michael Robinson and Margaret Sheehan “found that 59 percent of CBS election news stories failed to contain a single issue sentence, even though the scholars identified more than 90 issues on the 1980 campaign agenda” (Farnsworth & Lichter, 2003, p. 11). This supports the findings that 83 percent of American voters hold the opinion that the news media offers less coverage on campaign issues and lead candidates to disregard the issues as well in order to put more focus on performance (Dautrich & Hartley, 1999). The research of Dautrich and Hartley (1999) discovered that “through the 1996 campaign, voters consistently said ‘too much’ news media attention was paid to stories about the horse race and to stories about the personal lives of the candidates” (Dautrich & Hartley, 1999). In other words, audiences were dissatisfied with how news stations covered the campaign. They felt ill informed on the political stances of the candidates and top issues of the campaign.

The frequency of soft news to hard news in healthcare coverage is only a small component to understanding the composition of the content. In order to flesh out what other types of attributes to consider in broadcast coverage, we now turn to research done on framing.

Broadcast Framing

Framing is a concept that has been used to describe how things are structured, in other words, what is included in whole or part, as well as what is left out. “To frame is to select some aspects of perceived reality and make them more salient in a communicating context, in such a way as to promote a particular problem definition, causal interpretation, moral evaluation, and/or treatment recommendation.” (Robert Entman, 1993, p. 43; cr. Cappella & Jamieson, 1997, p. 45). Framing is defined by Cappella and Jamieson (1997) as the “rhetorical and stylistic choices, reliably identified in news, that alter the interpretations of the topics treated and are a consistent part of the news environment” (p. 39-40).

Word Choice, Cues, and Images

Framing of news messages “involves the construction of meaning through structured discourse” (Ibrahim, 2010, p. 114). It is what journalist and editors choose to discuss as well as those they disregard. Framing in the news media not only relates to what is discussed but how it is discussed. “Framing is a way of drawing attention to certain features of an issue while minimizing attention to others” (Cappella & Jamieson, 1997, p. 45). It provides a structure by which meaning and understanding of events, policies, and problems is created. The news media make use of several simple elements when constructing news stories. These choices involve details like wording, voice, videos and images to include (Ibrahim, 2010). Though each of these seems small, previous research has demonstrated the power that change in wording has on messages. Word choice, cue words, titles, and even what is left out can be used to draw on

previous knowledge and stereotypes to facilitate certain judgments (Cappella & Jamieson, 1997).

Daniel Kahneman and Amos Tversky (1984, cr: Cappella & Jamieson, 1997, p. 41) conducted a study on the significant effects that a simple word or phrasing adjustment can induce.

This study reveals that framing does have an effect; two statements can use the exact same information and produced extremely different interpretations from a slight alteration in word choice and phrasing.

In addition to the framing effects of word choice in messages, research has shown the influence that can occur when images are attached and how those images coincide with the story line. What seem to be innocent choices in image framing can have a huge impact on how a message is interpreted. Esposito (1996) asserts that the camera angles, images, story lines, and even lighting are not neutral actions and choices. Diana Ibrahim's (2010) research of how the news media framed Islam after the September 11th attacks found that news stations framed American Muslims and their religious practices in a favorable light, claiming that they were an "integral part of American life" (Ibrahim, 2010, p. 121) and Muslims who were not American were represented as violent and threatening. Ibrahim asserted that "the coverage of internal Islam mostly described Islam as a religion of peace. Conversely, external coverage of Islam was associated with violence, suicide and Jihad" (p. 121). Esposito's (1996) research of the O.J. Simpson case suggested that network news stations focused on other infamous criminal cases covered by the media previously, which connected Simpson to these other cases and therefore his "guilt was inferred through association" (Esposito, 1996, p.59). In other words, network news can use association as a way to frame the content of the story.

One reason for this type of framing is so that news networks can be aligned "with viewers as an objective third party" (Esposito, 1996, p. 59), allowing them the ability to remove

themselves from any responsibility of controversy between the First Amendment and the Sixth Amendment (Esposito, 1996). Ibrahim (2010) found that the television news used this approach because of its “inability to convey complexity” (p. 122). With network news programs lasting 30 minutes it is difficult to report convoluted topics with accuracy and keep the attention of viewers. It is because of this that Ibrahim (2010) urges journalist and news networks reporting on cultures, faith or other complex topics to be more “transparent” in their methods and processes (p. 123).

Word choices along with the types of images are framing techniques that have an impact on the interpretation of the message. However, it has been determined that the tone of those messages has just as much persuasive sway. Current literature explores the impact of positive and negative framing.

Goal-Framing

Goal framing is very recent perspective on message framing that makes use of gain and loss framing. The purpose of goal framing is to present a goal intended for the audience to adopt (Lee, Y.K., & Chang, C., (2010). When a message is framed positively the goal is focused on acquiring, or gaining a positive outcome. The goal of a negatively framed message is avoidance, or loss of a negative result. According to Lee & Chang (2010), “a distinguishing feature of goal framing manipulations is that both framing conditions promote the same act” (p. 5). In other words, messages that utilize goal-framing as a technique can utilize either a positive frame or negative frame to elicit the desired action. This framing technique of manipulating the same action is also supported by Kahneman and Tversky (1984) study of word choice manipulations of the same action and the effects of each of these messages. Kahneman and Tversky (1984) claim that small manipulations in wording, or the use of the gain frame or the loss frame, can

alter judgments and interpretations. However, debate continues as to which type of goal framing is more influential.

The two most common message framing techniques used with healthcare issues, like disease prevention, according to previous research, are the “gain frame” and the “loss frame” (T Riet et al., 2009). T Riet et al. (2009) were interested to discover what type of framing, positive or negative, with regard to health issues had the most persuasive impact. These two types of framing can persuasively impact the feelings of people positively by concentrating on the benefits or negatively by focusing on the possible detriments (Shen & Dillard, 2007, cr. T Riet et al., 2009). This concept of positive and negative framing was also researched by Bizer et al. (2010) who found that the negative frame with respect to attitude proved to be stronger. However, in terms of health issues T Riet et al. research uncovered that “ gain-framed information evoked greater levels of positive affect in recipients than loss-framed information, and that positive affect was associated with information acceptance, resulting in greater levels of information acceptance in the gain-framed condition” (T Riet et al., 2009, pp. 1270-1271). In other words, when messages are framed positively the information is understood and has more of a persuasive impact. Message framed negatively may evoke stronger attitudes already established, but it follows that these types of messages would prove to be more motivational and less persuasive (T Riet et al., 2009). In order to capture goal framing in the Network Nightly News broadcast coverage of the healthcare issue, this study will create positive and negative categories.

Beyond the framing of a message as positive or negative or gain vs. loss, as in goal framing, research has ascertained that framing can influence viewer’s attitudes, who they attribute responsibility to, as well as the types of decisions they make.

Persuasive Appeals: Attitudes, Attribution, and Decision Making

There are always two forms of the same attitude to take on an issue, one being supportive the other opposition. The question is which of these allows people to hold their attitudes with increased confidence. This question was posed by Bizer et al. when looking at how messages are framed. They explored “ whether simply framing one’s attitude as one of opposition or one of support can affect resistance to change and attitude strength more generally, and if so, whether attitude certainty is involved” (p. 63). Previous knowledge assumes that negative standpoints appear to have the stronger attitudes because they are more outspoken. For example, many activists hold opposing attitudes, such as anti-abortionist, may resort to violence and stage protest, while those holding supportive attitudes appear more peaceful (63). Studies have shown that negative comments, personality traits and behaviors seem to have more of an effect than the positive. “Bizer and Petty (2005) tested the notion that merely framing an attitude as being negative is also enough to enhance the strength of the attitude” (Bizer et al. 2011, p. 64). Bizer et al. (2011) not only confirmed what previous research has found, that framing message in the negative creates more of an impact, but they also revealed that people were more confident and consistent when holding the opposing attitude, claiming that “enhanced certainty was responsible for the fact that framing attitudes negatively led to more attitude-consistent behavioral intentions” (p.74). In other words, when people take the opposing view they are more certain of their attitudes. When networks frame news stories with words and phrases in the opposition it proves, according to Bizer et al.’s research, that they will be more persuasive.

Not only does framing have influence on attitudes and action but research has also shown that it can “affect people’s attribution of responsibility for social consequences” (Ben-Porath & Shaker, 2010, p. 467). In other words, the way the news media frames messages will shape

where audiences place accountability. Ben-Porath & Shaker studied how message framing with images impacted the placement of race responsibility in the aftermath of Hurricane Katrina. The foundation of their research alluded to Iyengar's (1987-1991) research that characterized news coverage of utilizing two framing techniques- episodic and thematic. News stories that are framed episodically approach the issue in discussion "through accounts of circumstances of specific people" (Ben-Porath & Shaker, 2010, p. 467). On the other hand, thematic framing of news stories "discuss problems in terms of general facts and figures" (Ben-Porath & Shaker, 2010, p. 468). The former framing technique placing responsibility of the condition on the people affected and the latter placing responsibility on external factors, such as the government et cetera, not the individuals involved (Ben-Porath & Shaker, 2010). Ben-Porath and Shaker (2010) discovered through their research that when messages were produced with images of the victims, the perception of responsibility fell more on the individuals involved and less on external factors. However, this only occurred when images were of blacks and the respondents white. The impressions of blacks stayed constant with or without the images. Both blacks and whites "were inclined to hold the government highly responsible for what had transpired in New Orleans after the storm" when no images were offered with the story (Ben-Porath & Shaker, 2010, p. 482). This study reveals how important new media framing is on "societies expectations from its government" (Ben-Porath & Shaker, 2010, p.484) but what about the expectations on society. How does framing influence how society makes decisions?

With the media providing the information necessary for the decision making of citizens with regard to voting, researchers have found importance in understanding these decisions. Domke and Shah (1995) focused their research on this issue of decision making processes of voters as well as their interpretations of the issues they were voting on. Domke & Shah (1995)

acknowledged that in previous studies the salience of an issue was an important factor for people when they were voting and that the framing of these messages by the media impacted the level of salience. Knowing these facts, Domke & Shah molded their study to examine “how members of various subpopulations process political issue information, particularly about ‘social-moral’ issues, in making voting decisions” (Domke & Shah, 1995, p. 49). The results of their study revealed that interpretations of an issue do in fact have a considerable influence on how people make their decisions about issues (Domke & Shah, 1995). Their study further concluded that “the interpretation of these issues, not the importance assigned to them, has the greatest impact on an individual’s decision-making strategy” (Domke & Shah, 1995, p. 61). Domke & Shah (1995) research uncovered that what the news media chooses to attend to, whether it be “societal or ethical implications”, that it has the ability to impact the processing that voters go through (p.62).

The news media provides cues to citizens as to where their attention should be focused and how these events are perceived. An increase in entertainment news is becoming the end result due to the competition for viewers between news stations (Esposito, 1996). Research has found that many Americans prefer sensationalized news where coverage concerns “personalities, personal relationships, physical appearances, and idiosyncrasies” even if they hold no relevance (Esposito, 1996, p. 52). With the news media’s ability to control the framing of the stories they cover, they are capable of manipulating these reports to appear in the most desirable and dramatic light.

The research presented here explains the types of news media styles as well as several individual framing techniques and their potential effects when utilized by the news media. What the research does not examine are the frequencies of these techniques through the life time of the

coverage of a major policy issue and the extent to which they are applied. For this reason, this study will examine these frequencies in an attempt to uncover the influence of style and framing on the relationship of policy and political content.

To examine this issue a total of 35 categories were developed to interpret the content of the healthcare coverage by the network news stations. The categories were established from previous categories developed by Budge et al. (2001) from their research of political party platforms. The categories in this study were separated into six general themes. Four of these themes explore concepts specifically focused on the healthcare policy; how the healthcare system functions, how healthcare impacts the economy, its role within the democracy as well as how it influences society as a whole. Content that fits into these themes are regarded as substantive issues because they deal with the healthcare issue on a functional level which leads to greater understanding. Other themes focus less on the policy of healthcare and more on the political issue. Two of the four themes explore the politics behind certain social groups and bipartisan lines. Categories dealing with the horse race and backdoor issues are also placed within these two themes because of their political nature. Content that falls into these themes point to matters beyond the healthcare issue. In other words, they concentrate on secondary consequences of the healthcare issue, which have no relation in the development of meaning and understanding.

In order to reveal the extent of each theme within a news broadcast and to successfully apply the influence of word choice, content must be examined in its simplest structure, the sentence. However, because sentences can also be complex and have multiple actions occurring, Budge et al. (2001) proposes the term “quasi-sentence” for a unit of analysis. This allows for complex sentences to be broken down into the multiple subjects and action verbs occurring within the sentence. Therefore, each broadcast will be dissected into quasi-sentences, each being coded

with one of the 35 categories, yielding a more comprehensive result of the overall themes covered in each broadcast.

Since news broadcasts covering the health care reform issue fall under the technique that Iyengar (1987) characterizes as thematic, stories of “general facts and figures”, different categories developed for the analysis will be divided into themes.

RQ 1: Which content themes did the network nightly news emphasize the most frequently in the coverage of the healthcare issue?

RQ 2: Which content category did the network nightly news emphasize the most frequently in the coverage of the healthcare issue?

Budge et al. study of political party platforms established important components of policy, which are regarded as substantive issues because they deal with the healthcare issue on a functional level which leads to greater understanding. However, the research of Dautrich and Hartley (1999) in campaign coverage, found that political themes were focused on more than policy. These themes point to matters beyond the healthcare issue. In other words, they concentrate on secondary consequences of the healthcare issue, which have no relation in the development of meaning and understanding.

RQ 3: Were healthcare categories of policy or politics more frequently covered in the network nightly newscasts?

RQ 4: Were issues of the healthcare system or its economics more frequently covered?

RQ 5: Were the actions of the President or Political Parties mentioned more frequently in the network nightly news healthcare coverage

Literature surrounding healthcare reform has pointed to problems surrounding groups of individuals who some consider undeserving as part of the continued struggle to pass reform (Quadagno, 2005 & Funigiello, 2005). This raises interest in where the network nightly news focused attention with respect to these different social groups.

RQ 6: Which special interest groups (i.e., middle class, labor/farmers, or underprivileged) were the most frequently named in the network nightly newscasts of healthcare?

Literature and scholars have attended to the impact of framing content as “gain” or “loss”. In order to capture this several categories were divided to include a positive and negative option. Categories will employ the use of positive and negative options as a way to capture frequencies of “gain” and “loss” framing

RQ 7: Was the network nightly news coverage of the healthcare issue framed positively or negatively more frequently.

RQ 8: What was the ratio of positive to negative framing of Political Parties in the healthcare coverage?

Based off of the definitions from Baum & Jamison, 2006, Bennet, 2005, and Patterson, 2000, hard news and soft news can be distinguished by content that focuses on emotional appeals versus content that sticks to the facts of policy and politics. Discovering the amount of coverage that falls within these two styles of news coverage can be accomplished by creating categories to encompass content that includes the emotional appeals found in soft news in addition to categories that cover hard news.

RQ 9: Was hard news or soft news more frequently occur in the nightly news coverage of the healthcare issue

Chapter 3-Method

This chapter deals with the specific procedures, sampling and reliability of the study. It begins by explaining the breakdown of nightly and cable news stories that deal with the healthcare issue. Each broadcast is analyzed using seven content themes. Cappella and Jamieson (1997) discussed in “Spiral of Cynicism” how news broadcast are framed. Three of the four framing structures they propose were used to develop the framework for each category. Thematic structures and scripts are framing techniques that look at the thesis and the “standard story lines that create narrative tension” (Cappella & Jamieson, 1997). The content categories regarding the different themes were developed as a way to flesh out these two parts of broadcast framing. A content category was developed to address this approached found in broadcast news.

Content Categories

The first section of categories dealt with the basic plot of each broadcast on healthcare. The categories in this section were broken up into six different themes: *social virtue, healthcare political system, healthcare economy, democracy, social groups, human politics* and *other politics*. Categories were started with a coding system, developed by Budge, et al. (2001), for capturing themes elicited in political party platforms. With the healthcare issue being a huge political platform it was a logical and proved effective to utilize this content coding scheme as a foundation for the content categories in this study. The categories within the healthcare political system and healthcare economy did not diverge from the original categories with the exception of inserting the term healthcare as a way to provide more differentiation from other issues. Three of the original categories; political authority, free enterprise, and democracy were divided into positive and negative opinions. The economy theme kept four of the original categories and added two from another theme. Social virtue was a new theme created with two categories

originally from different themes. Finally, the human politics theme and the other politics theme and categories within were created in order to capture content concerning the healthcare issue that the basic political platform categories did not possess. Below are the themes and content categories used for analysis of network broadcast news on the healthcare issue.

Social Virtue

The first theme of social virtue contains three categories defined as being concerned with the effects of the healthcare bill on society as a whole. The categories include;

Social Justice in Healthcare: A concept of equality; need for fair treatment of all people; Healthcare coverage for all citizens.

Social Harmony: Appeal for national effort and solidarity; need for society to see itself as united, appeal for public spiritedness; decrying anti-social attitudes in times of crisis; support for the public interest.

Social Responsibility: Need for accountability to society; being reliable in actions that improve society as a whole with regard to healthcare.

Democracy

Theme number two dealt with concepts of democracy. These five categories look at how well the Healthcare issue utilized concepts of the democratic state and the constitution.

Healthcare Democracy Positive: Favorable mentions of democracy as a method or goal concerning the healthcare issue. This would be encouraging involvement of all citizens in decision-making of the healthcare bill.

Healthcare Democracy Negative: Unfavorable mentions of democracy as a method or goal concerning the healthcare issue. This would be discouraging involvement of all citizens in the decision-making of the healthcare bill.

Constitutionalism in Healthcare Positive: Support for specific aspects of the constitution; use of constitutionalism as an argument or policy as well as general approval of the constitutional way of doing things with respect to healthcare.

Constitutionalism in Healthcare Negative: Opposition to the constitution in general or to specific aspects with respect to healthcare.

Social Issues within Healthcare: Mentions of specific social topics or concerns within Healthcare that may be controversial; i.e. Abortion

Healthcare Economy

This theme contains nine categories that describe how the healthcare system affects the economic system.

Free Enterprise in Healthcare Positive: Favorable mentions of free enterprise capitalism in healthcare; superiority of individual healthcare enterprise over state and control healthcare systems.

Free Enterprise in Healthcare Negative: Opposition to mentions of free enterprise capitalism in healthcare; superiority of state and control healthcare systems over individual healthcare enterprise.

Healthcare Market Regulation: Need for regulations designed to make private healthcare enterprises work better; actions against healthcare monopolies and trusts, and in defense of healthcare consumers.

Controlled Healthcare Economy Positive: General need for direct government control of healthcare prices

Controlled Healthcare Economy Negative: Opposition to a need for direct government control of healthcare prices

Nationalization of Healthcare Positive: Government ownership of healthcare, partial or complete.

Nationalization of Healthcare Negative: Opposition of government ownership of healthcare, partial or complete.

Welfare State Expansion: Favorable mentions of need to introduce, maintain or expand any social service; support for social service such as healthcare.

Welfare State Limitation: Limiting expenditure on social services such as healthcare.

Healthcare Political System

The fourth theme has six categories that deal with the Healthcare policy and focuses on the procedures and guidelines of the Healthcare system.

Healthcare Decentralization: Support for federalism or devolution; more regional autonomy for healthcare policies and/or the economy; support for keeping up local and regional healthcare customs, systems and institutions.

Healthcare Centralization: Opposition to healthcare decision-making at lower political levels; support for more centralization in healthcare procedures and policies.

Healthcare Efficiency: Need for efficiency and economy in healthcare; general appeal to make the process of healthcare cheaper and more effective; issues concerning cost and taxes associated with healthcare.

Healthcare Political Corruption: Need to eliminate corruption and associated abuse within the healthcare system.

Healthcare Political Authority Positive: Favorable mentions of strong government within the Healthcare system.

Healthcare Political Authority Negative: Opposition to mentions of strong government within the Healthcare system.

Social Groups

This theme includes three categories with respect to specific economic groups of people and the benefits that policies have for these groups.

Labor Groups and Farmers: Support for the working class, unemployed, farmers; any policy aimed specifically at benefitting these groups.

Middle Class and Professional Groups: Favorable references to middle class, professional groups such as physicians, lawyers, etc.; any policy aimed specifically at benefitting these groups.

Underprivileged Minority Groups: Favorable references to underprivileged minorities who are defined neither in economic nor demographic terms (e.g. handicapped, homosexual, immigrants, etc.); any policy aimed specifically at benefitting these groups.

Human Politics

This sixth theme concentrated on the human politics occurring in conjunction with the healthcare issue. These twelve categories look at the politics and strategies of people or groups of people in political and/ or authority positions.

Presidential Politics Positive: Favorable mentions of the president's actions and behaviors in conjunction with the healthcare issue.

Presidential Politics Negative: Unfavorable mentions of the president's actions and behaviors in conjunction with the healthcare issue.

Political Party Politics Positive: Favorable mentions of the actions and behaviors of members of congress, Republicans and/or Democrats with respect to the healthcare issue.

Political Party Politics Negative: Unfavorable mentions of the actions and behaviors of members of congress, Republicans and/or Democrats with respect to the healthcare issue.

Political Horse-race: References to the shift in control and influence between the major political parties and/or candidates representing those political parties; debates of which side is right or wrong on the healthcare issue.

Backdoor/Under-the-table Politics: Mention of silent deals, bargains, and/or mutual understandings between political parties, presidential administrations, etc. with private cooperation's in regards to the healthcare bill.

Insurance Companies Positive: Favorable mentions of the actions and behaviors of health insurance companies.

Insurance Companies Negative: Unfavorable mentions of the actions and behaviors of health insurance companies.

Political Approach/Strategy to Healthcare Positive: Favorable mentions of the political methods and strategies by the president, congress, healthcare providers, and/or others with regard to healthcare.

Political Approach/Strategy to Healthcare Negative: Unfavorable mentions of the political methods and strategies by the president, congress, healthcare providers, and/or others with regard to healthcare.

Emotional Appeals to Healthcare Positive: Favorable references to emotions, feelings, dreams, and memories regarding healthcare.

Emotional Appeals to Healthcare Negative: Unfavorable references to emotions, feelings, dreams, and memories regarding healthcare.

Other Politics

This theme looks to capture the political issues and actions that are discussed during a broadcast that has no reference to healthcare.

President Other Positive: Favorable mentions of the president's actions and behaviors with regard to issues other than healthcare.

President Other Negative: Unfavorable mentions of the president's actions and behaviors with regard to issues other than healthcare.

Political Party Politics Other Positive: Favorable mentions of the actions and behaviors of members of congress, republicans and/or democrats in conjunction with issue other than healthcare.

Political Party Politics Other Negative: Unfavorable mentions of the actions and behaviors of members of congress, republicans and/or democrats in conjunction with issue other than healthcare.

Political Issues Other Positive: Favorable mentions of important political issues other than healthcare. i.e. The Economy

Political Issues Other Negative: Unfavorable mentions of important political issues other than healthcare. i.e. The Economy

The frequency of each of these categories determines the major theme or plot of the broadcast. It is possible that more than one theme be found within a single broadcast. However, if less than 10% of the theme was found it is not considered as a major theme. Once the thematic categories were determined the content from those categories allow for the major characters could be established.

Beyond the content categories three other options must be offered in order to measure the construct validity; (1) **No category applies**. If the sentence does not seem to fit within any of the categories provided then this code is assigned. (2) **More than one category applies**. If the sentence appears to fall under more than one code and yet cannot be broken down into an addition quasi-sentence then this category is allocated. (3) **The category is unclear**. If any uncertainty of which category to assign to a sentence occurs then this code applies.

Sampling

Even though viewership for the three network nightly news casts has suffered a continued to decline in recent years, it still maintains the largest viewership over the increasing popularity of cable news, talk radio and the Internet (Farnsworth and Lichter, 2003). According to the annual report on American Journalism developed by the PEJ, network news had an average of 22.3 million viewers each evening in 2009, this over the average viewership of 3.88 million “for cable news across all three channels in prime time” (The State of The News Media, 2010).

The percentage of news hole coverage of the healthcare issue was the largest by cable news (The State of the News Media, 2010), however, these programs do not even draw a fraction of the audience of nightly news. Not only does the nightly news continue to attract the largest audiences despite the current decline, but “they also control many of the alternative news outlets on cable, where material from the evening newscasts can be recycled for cable news programming” (Farnsworth and Lichter, 2003). Therefore, this study will contain the content analysis of the health care issue to the Big Three; NBC’s Nightly News with Brian Williams, ABC’s World News, and the CBS Evening News with Katie Couric over the eight months between August 2009 to March 2010. According to the PEJ, these eight months saw the three

largest peaks in coverage of the healthcare issue (Six Things to Know About Health Care Coverage, 2010).

Samples for this study will be pulled from available online archives and the *Vanderbilt Television News Archive*. This database has accumulated all network television news broadcast since the late 1960's. Broadcasts can be search on the database in a variety of methods. This study will not only search broadcasts that fall within the desired eight month time frame, but more importantly will focus only on the healthcare subject in order to prevent the selection of a news broadcast that does not cover the healthcare issue.

Since "media content produced by commercial enterprises follows cycles" (Riffe et al., 2005) a stratified random sample is the most effective option. Each evening's nightly news cast throughout the week might differ slightly in coverage. It is important then to divide the sample into strata based on network and days of the week. Riffe et al. found that "the most efficient form of sampling for network TV news was randomly selecting 2 days from each month for a total of 24 days" (Riffe et al, 2005). Because this study is looking at three different networks, and comparing then different network coverage is not a goal of this research, 3 random days will be sampled from each month, one from each network, totaling in 30 days of sampled data. Utilizing this method of sampling, excluding Saturday and Sunday, should result in an accurate account of the content coverage surrounding the Healthcare issue during 2009 and 2010.

Unit of Analysis

The Budge et al. (2001) study of political party platforms partitioned messages into sentences and "quasi-sentences" as their unit of analysis. Budge et al. (2001) claimed that "a sentence is a basic unit of meaning" (p.27) and can be used to identify arguments. Since some sentences may contain two or more arguments they called their unit quasi-sentences, "or set of

words containing, one and only one, political idea" (Budge et al. 2001, p. 27). In other words, a simple sentence or quasi-sentence was composed of- subject + verb phrase = Argument. Election programs were transcribed and broken down into this simple format for the purpose of coding each argument.

This study will use Budge et al. (2001) approach. Each broadcast will be transcribed for the purpose of identifying the quasi-sentences that make up the entire broadcast (*see Appendix C*). However, because network news broadcast are classified as narratives and not arguments then formula for what determines a quasi sentence will be slightly different. Narratives are centered on actions, therefore, in this study of network news broadcast a quasi-sentence is defined as a basic unit of meaning used to identify actions. In other words, the unit of analysis will be the different actions that can be identified within each news broadcast covering the healthcare bill (Action= subject + action verb). For example, a simple sentence from a broadcast will include a subject, attribute, and an action verb (Budge et al. 2001).

Example: The president signed the Health care bill into law at the White House today.

This sentence offers one action verb and can be coded as such. However, most sentences are more complex and may contain multiple actions and would therefore need to more than one code applied.

Example: The president said he was signing the bill on behalf of his mother and those Americans, who like her, had to fight with Health Insurance Companies.

In this instance, more than one action verb occurs. 1) The president said he was signing the bill on behalf of his mother and those Americans, 2) who like her, had to fight with Health Insurance

Companies. These types of sentences necessitate separating into “quasi-sentences”. Sentences can be broken down into as many quasi-sentences that are required depending on the number of action verbs occurring in the sentence (Budge et al. 2001).

Example : After more than a year of negotiations, debate and political drama, President Obama today signed the historic health care bill that could reshape care for millions of Americans while setting up a divisive battle with Republicans that's expected to spill into the November elections and beyond.

Here we find a text that contains five different quasi-sentences; 1) After more than a year of negotiations, debate and political drama, 2) President Obama today signed the historic health care bill, 3) could reshape care for millions of Americans, 4) setting up a divisive battle with Republicans, 5) that’s expected to spill into the November elections and beyond. Each quasi-sentence is then assigned a code from the list of content categories previously described.

Step 1: Identify Quasi-Sentences

Each broadcast should be read through in its entirety before dividing up into quasi-sentences. Once the broadcast has been read through each paragraph is examined individually and separated into the different actions taking place. Each quasi-sentence in each paragraph of the broadcast is marked. At this point no notations of codes should be achieved. However, certain themes should arise and can be noted in the margins. The total number of quasi-sentences denoted in a broadcast equals the total number of units of analysis (Budge et al., 2001, p. 24).

Step 2: Code Quasi-Sentences

After identifying each quasi-sentence that make up an entire news broadcast they can then be coded with a corresponding number to the content categories. 44 categories were

developed for coding based off of the research from Budge et al. (2001). Each quasi-sentence is coded into one and only one of the 44 categories, which are provided above as well as in the codebook. Each of these categories were grouped into seven major themes that explained the type of policy or politics occurring with the categories. The small quantity of categories along with pairing into themes allows for them to be memorized easily resulting in a quicker coding process (Budge et al., 2001). By using Budge et al.(2001) policy platform codes as a foundation for the categories in this study makes it feasible to apply the same codes as a way to examine any policy of interest.

Step 3: Code Problems and Difficulties

There may be times during coding that a quasi-sentence doesn't appear to fit into one of the intended categories. Budge et al (2001) developed several options for dealing with these issues that, several (decision 1, 2, 3, & 4) but not all, are also appropriate for this study (p. 28-33). Difficulties may involve:

- a. No category applies.
- b. More than one category applies.
- c. The category is unclear.

No category applies

The 44 categories created for the coding of broadcast coverage on the healthcare issue attempt to describe the content however it may not be exhaustive. There are possibilities that content covers issues that are not of interest for the purpose of this study or that the category in question is rarely used. These types of categories are important to address whether relevance is discovered. In order to handle content that doesn't fit into any of the generated categories three rules were designed.

Decision Rule No. 1: Checking Definitions of all Categories in Policy Domains

Whenever tempted to treat a quasi-sentence as uncodable, repeat reading the definitions of categories in the relevant policy domains because it might well be that the quasi-sentence contains a policy position that is taken only seldom. Therefore, the specific definition of the respective category may just have been forgotten.

Decision Rule No. 2: Identifying Connecting Sentences

Some sentences, which may otherwise be uncodable, may just be connecting sentences between two actions (for instance: Therefore, we are going to do three things.) These connecting sentences themselves do not constitute meaningful action but are part of an on going action. Therefore, connecting sentences should be coded in the same category as surrounding sentences or as the bulk of the paragraph they appear in.

Decision Rule No. 3: Creating Subcategories

Look at all uncoded sentences a second time and try to figure out whether some of these statements have an equivalent meaning. Make sure that there really is no related category that captures the sense of these quasi-sentences. Should many quasi-sentences contain the same action which are not subsumable under one of the 35 categories, note down a temporary 3-digit code and a temporary definition for a new subcategory and contact the supervisor. Do not create subcategories for each and every single issue because this is useless. Never create new categories without checking with the supervisor because you may destroy the comparability of the data.

More than one category applies

Occasions may arise when it seems that a quasi-sentence fits into more than one category. If this takes place the following rules should be practiced.

Decision Rule No. 4: Broadcast Headings as Guidelines

Look at the broadcast heading of the quasi-sentence in question. Then, take the category which covers the topic of the broadcast. Thus, broadcast headings are taken as guidelines for coding although these headings themselves are not to be coded.

More decision rules will be created and applied as necessary during the progression of data analysis. For instance, there may be occasions where a quasi-sentence appears to fit into two different categories. These cases will be dealt with by determining which category holds more influence than others. Since a large number of combinations may occur, these rules will only be developed when they emerge in order to limit the number of rules to those of necessity.

The category is unclear

Even after applying decision rules 1 through 5, it may still be uncertain of the direction of the action. Reading an entire paragraph at a time can solve some of these problems because these quasi-sentences may fit within the context of the entire paragraph. However, if coders are unclear these sentences should be coded as such. Conclusions should not be made as to what the coder thinks the sentence is alluding to and instead should code what the statement says.

Coding News Broadcasts

Agreement of the content categories must be consistent within each broadcast. Riffe et al. (2005) defines reliability within a content analysis as, “agreement among coders about categorizing content. Indeed, content analysis as a research tool is based on the assumption that explicitly defined and accepted concepts definitions control assignment of content to particular categories by coders” (123). To increase reliability for this study several steps were taken with respect to the content categories.

Content Analysis Protocol

Definitions:

The first step was defining each category clearly and unambiguously and to provide an exemplar example. Riffe et al. (2005) claim that reliability within a content analysis begins with the definitions that are then applied to the relevant content. The better the definitions, the more accuracy between coders. Most concepts are more than one dimension in their meaning (Riffe et al. 2005). Developing multiple levels of definitions helps alleviate confusion between complex and abstract concepts. Due to the complex political concepts found in news broadcasts covering the health care issue, conceptual definitions were developed for each content theme and operational definitions for each content category within those themes. For example, the *Democracy* theme defined the following categories in general terms; *these four categories look at how well the Healthcare issue utilized concepts of the democratic state and the constitution*, while one of the categories in this theme, *Healthcare Democracy Positive*, was more specific in nature; *favorable mentions of democracy as a method or goal concerning the healthcare issue. This would be encouraging involvement of all citizens in decision-making of the healthcare bill.* The seven themes and the forty-four categorical definitions making up the content categories, were each individually defined and then put into a code book (*see Appendix A*) along with the protocol of how to watch each broadcast and record information from those broadcasts onto the coding sheet.

Coding Sheet:

A standard single case coding sheet (Riffe et al. 2005) with each of the seven themes and forty-four content categories was the choice for this particular study (*see Appendix B*). According to Riffe et al. (2005) this type of coding sheet is most appropriate when dealing with themes.

Each coding sheet is used for each recording unit, which in the case of this study is a single news broadcast on the healthcare issue. Coding sheets contained basic broadcast information such as network, length of broadcast, date of broadcast. The second portion of the coding sheet was broken down into the different content categories. The steps on the coding sheet mirrored the steps within the codebook and protocol to allow for easy reference (Riffe et al. 2005). Each content category will be marked with the total number of occasions found within the news broadcast. For instance, coders might mark 18 units of *Presidential Politics Negative*, 3 units of *Labor Groups and Farmers*, and 9 units of *Healthcare Political Corruption*. This type of marking would indicate that the main theme of the broadcast be that of *Human Politics*.

Coder Training:

Training of coders went through a two step process put forth by Riffe et al. (2005). First each categorical definition was described and the code sheet was explained. This step familiarizes each coder “with the content being analyzed” (Riffe et al. 2005, 139). This step increases the comfort level of coders and clarifies the expectations and demands of coding process for this study of broadcast narratives (Riffe et al. 2005). Any unclear themes and categories were elaborated on if necessary during this step. Also, the code sheet was explained step by step using an unrelated news broadcast. Any questions or clarifications concerning the coding sheet were further explained.

The second step in training was for coders to practice coding three news broadcast using the codebook and coding sheet. Any questions or concerns they had concerning the definitions and process were then addressed and clarified by the researcher. This step left coders to themselves to work out the coding scheme. This step clarified whether or not coders were “approaching the content from similar or different frames of reference” (Riffe et al. 2005, 139).

Coders were instructed to read through the codebook at the start of each new session in order to maintain consistency between coding sessions. In addition, coders were directed not to exceed three hours of coding in one session and not to perform more than two sessions in a 24 hour period as a way to prevent fatigue.

Reliability

Coders for this project were required to perform two different reliability tests. The first involved marking the unit of analysis. These were the specified segments that each broadcast was divided into. Coders were instructed to read each sentence and mark each simple sentence that included a subject, attribute, and an action verb (Budge et al. 2001) within each complex sentence. Coding revealed that the division within a complex sentence could range from 0 to 6 divisions, which is by no means an exhaustive range. After unitizing the data, coders were instructed to indentify the policy or political category that best reflected each unit. If they could not determine the most suitable category they were instructed to mark no category, more than one category, or category is unclear. Reliabilities for unitizing and coding were generated and evaluated on frequency of agreement.

Unitizing Reliability

Unitizing reliability between coders with respect to units of analysis, was determined through the use of two unit-by-unit test: (1) finding the “ratio of coding agreement” and (2) Cohen’s *k*. According to Schenck-Hamlin et al. (1982), unit-by-unit reliability a more precise reliability test than other types. The “ratio of coding agreement” is the percentage of agreement between coders. The number of agreements for each code are added together and then divided by the total number of units. Coder 1 and coder 2 had a "ratio of coding agreement" (RCA) of .85.

This is a very liberal reliability test. Therefore, Cohen's Kappa was performed to produce a more conservative reliability number.

“Cohen's k is a unit by unit reliability measure that corrects for chance agreement” (Schenck-Hamlin et al., 1982, p. 98). The Kappa value between coder 1 and coder 2 for the unitizing index was .74, which according to Landis and Koch (1977) is a “good” reliability. These results allow for the conclusion that sufficient unitizing reliability was attained.

Coding Reliability

Coding Reliability was also determined with unit-by-unit analysis and was achieved through the same two methods as the unitizing reliability: (1) the “ratio of coding agreement and (2) Cohen's k . The average unit-by-unit of agreement was determined by finding the percentage of agreement between the two coders. Schenck-Hamlin et al. (1982) note that “agreement is defined as what the coders jointly believed the unit was as well as what the unit was not” (p. 98). The degree of agreement between coder 1 and coder 2 was .60.

Cohen's k was the second coding reliability test used. In this reliability test “a k value of 1.00 is perfect agreement between coders, and values of zero and lower represent either chance agreement or agreement that is less than expected by chance” (Schenck-Hamlin et al., 1982, p. 98). Results between coder 1 and coder 2 was .58, a fair to good reliability according to Landis and Koch (1977). The results of these two reliability test on the coding units point to a less than adequate reliability.

Three different circumstances were found with coding that decreased reliability. First, explanations were given on how to code the positive and negative categories based on language and framing. However, coders were not instructed how to code if units appeared neutral. This caused a discrepancy between coders, one always coding neutral in the positive category and the

other coder in the negative category. The second coding problem found was where to place focus when two different subjects were involved in the same action. Coders occasionally coded these the same. However, instructions on where to place focus in these instances was not given, causing inconsistencies between coders. The final issue that decreased reliability in coding fell on Decision Rule No. 2: Identifying Connecting Sentences, which states;

Some sentences, which may otherwise be uncodable, may just be connecting sentences between two actions (for instance: Therefore, we are going to do three things.) These connecting sentences themselves do not constitute meaningful action but are part of an ongoing action. Therefore, connecting sentences should be coded in the same category as surrounding sentences or as the bulk of the paragraph they appear in.

These connecting sentences were coded inconsistently by coders because it was not clarified whether to code these sentences to the previous unit or the subsequent one. Also, if coders did not agree on what the surrounding sentences should be coded, then the connecting sentences were also in conflict. Discrepancy with these types of sentences potentially increased the amount of disagreement with coding.

Validity

Content validity was established by finding the percent of uncodable data. Schenck-Hamlin et al. (1982) define content validity as “the degree to which information is lost by limitations of the present category scheme” (p. 99). Uncodable data fell under *Theme 8- Coding Problems and Difficulties*. Coder 1 coded Theme 8 at .098 and coder 2 coded Theme 8 at .119. Of these 97-98% fell under the “no category applies” category. This category was employed to catch sentences and parts of the news broadcast that are irrelevant to the study. For example, many broadcast welcome audiences to the show as well as thank them for watching, introduce

specialist who are visiting, transition to correspondents that are out in the field, etc. This content is important to the flow of the broadcast but is irrelevant to the actual content being discussed. All of these comments, introductions, and transitions were coded under Theme 8 decreasing validity slightly. However, the relevant content validity was .002 for coder 1 and .002 for coder 2. These results conclude that inefficient validity was achieved.

Chapter 4-Results

Nine research questions were developed in an attempt to understand what occurred in the coverage that resulted in so much confusion among Americans, specifically those watching the network nightly news. Contingency tables were set up to analyze the data for each research question. The frequencies of observations in the tables are interpreted by computing the chi-square test (χ^2) for statistical significance, and calculating the contingency coefficient (C), a measure of association.

Following the tabulation of the 30 Network Nightly News broadcast, a total of 1891 units were coded into the 44 thematic categories. These categories fell into eight themes; the first five themes dealt with the policy of healthcare, theme 6 and 7 covered the politics surrounding healthcare, and theme 8 was established to catch coding issues or units that did not fall into any other category. Theme 8 was not recorded into any of the results (for analysis on this theme see the section on “validity” in Chapter 3).

Research question one was concerned with the frequency of the themes found in the coverage of healthcare. Table 1 below provides an account of the number of units coded in each theme.

Table 1: Frequency of Healthcare Themes Covered in the Nightly Newscasts

THEME	Frequency of Coverage
Social Justice	33
Democracy	24
Healthcare Economy	95
Healthcare Political System	206
Social Groups	16
Human Politics	1031
Other Politics	281

This table reveals that over a thousand units were devoted to the theme of Human Politics. This is an overwhelming number of units in comparison to the category with the second highest frequency count, Other Politics at 281 units. This table also illustrates that the largest policy theme was Healthcare Political System, which was smaller than the two themes dealing with politics, with a frequency of 206 units.

Human Politics and Other Politics were combined for the testing because both themes cover political issues. The expected frequency of each theme was 281 units. The chi-squared test reported significant differences among the themes at $p < .0001$ ($\chi^2 = 4629.751$, $df = 5$, $C = 0.856$). The test indicates that political themes were more extensively covered than policy themes by network nightly news stations was.

The second research question deals with the breakdown of each category beyond their theme. Table 2 below has the breakdown of each theme into the 44 coded categories. Unit frequencies of each category from the 30 broadcasts examined are listed, as well as the percentage of each category within the theme. Percentages of units for each theme are also listed.

Table 2: Frequencies and Percentages of Categories found in the Nightly Newscasts

Theme	Categories	Frequency of Coverage	Percentage of Categories within Themes	Percentage of Units for each Theme
Social Justice	Social Justice in Healthcare	17	52%	1.7%
	Social Harmony	1	3%	
	Social Responsibility	15	45%	
Democracy	Healthcare Democracy Positive	1	4%	1.3%
	Healthcare Democracy Negative	2	8%	
	Constitutionalism in Healthcare Positive	1	4%	
	Constitutionalism in Healthcare Negative	0	0%	
	Social Issues within Healthcare	20	83%	
Healthcare	Free Enterprise in Healthcare Positive	6	6%	5%

Economy	Free Enterprise in Healthcare Negative	5	5%	
	Healthcare Market Regulation	28	29%	
	Controlled Healthcare Economy Positive	8	8%	
	Controlled Healthcare Economy Negative	5	5%	
	Nationalization of Healthcare Positive	5	5%	
	Nationalization of Healthcare Negative	8	8%	
	Welfare State Expansion	18	19%	
	Welfare State Limitation	12	13%	
Healthcare Political System	Healthcare Decentralization	7	3%	11%
	Healthcare Centralization	2	1%	
	Healthcare Efficiency	116	56%	
	Healthcare Political Corruption	12	7%	
	Healthcare Political Authority Positive	37	18%	
	Healthcare Political Authority Negative	32	16%	
Social Groups	Labor Groups and Farmers	6	37%	0.8%
	Middle Class and Professional Groups	9	56%	
	Underprivileged Minority Groups	1	6%	
Human Politics	Presidential Politics Positive	83	8%	54.5%
	Presidential Politics Negative	65	6%	
	Political Party Politics Positive	78	7%	
	Political Party Politics Negative	166	16%	
	Political Horse-race	79	8%	
	Backdoor/Under-the-table Politics	99	10%	
	Insurance Providers Positive	5	0.4%	
	Insurance Providers Negative	29	3%	
	Approach/Strategy to Healthcare Positive	145	14%	
	Approach/Strategy to Healthcare Negative	142	14%	
	Emotional Appeals to Healthcare Positive	47	4%	

	Emotional Appeals to Healthcare Negative	93	9%	
Other Politics	President Other Positive	57	20%	15%
	President Other Negative	36	13%	
	Political Party Politics Positive	20	7%	
	Political Party Politics Negative	67	24%	
	Political Issues Positive	38	13%	
	Political Issues Negative	63	22%	

The table offers some interesting findings. The largest unitized category was category Political Party Politics Negative, at 166 units, which comprised nearly 9% of total coverage. These results further expound that of the political issues discussed; most were focused on the negative framing of the actions of democrats and republicans.

Approach/Strategy to Healthcare Positive and Approach/Strategy to Healthcare Negative were found at 145 and 142 units respectively. Therefore, coverage of the healthcare issue not only focused on the negative actions of congress but also stressed the different tactics they practiced in hopes of moving healthcare reform forward or preventing its progress. It is important to point out that the top three categories are all found within Human Politics.

The fourth most frequent category found in nightly news coverage was not a political category but one explaining the policy. Healthcare Efficiency was found 116 times, revealing that when networks did discuss the policy of healthcare is was generally concerned with the cost of healthcare and how it would impact taxes. It is interesting to point out that the second most frequent policy category, Healthcare Political Authority Positive at 37 units, was only larger than 4 of the 18 political categories. In other words, of the 26 policy categories and 18 political categories, network nightly news stations chose to center their coverage primarily on the political categories.

Research question 3 was interested in the combined frequencies of themes and categories that dealt with policy and those that were interested in politics.

Table 3: Frequency of Policy and Political Categories in the Network Newscast

	Frequency/Observed N	Expected N	Residual
Policy	374	843	-469
Healthcare Politics	1312	843	469

The expected frequency of these two types of coverage was 843 units. The chi-squared test reported significant differences among the themes at $p < .0001$ ($\chi^2 = 521.835$, $df = 1$, $C = 0.486$). The findings of this test suggest that network news coverage of the healthcare issue preferred attending to the politics surrounding the issue instead of the policy of healthcare.

The fourth research question examined the two most recurrent policy categories; healthcare economics and the healthcare system.

Table 4: Frequency of Healthcare Economics and Healthcare System Coverage

	Frequency/Observed N	Expected N	Residual
Healthcare Economics	95	150.5	-55.5
Healthcare System	206	150.5	55.5

The expected frequency of these two categories was 150.5 units. The chi-squared test reported significant differences among the themes at $p < .0001$ ($\chi^2 = 40.934$, $df = 1$, $C = 0.350$). The figures of this test indicate that when network news coverage discussed healthcare policy most attention was paid to specific aspects of the healthcare system, such as cost, taxes, and the amount of control and regulation given to governmental institutions versus private companies.

Research question 5 wanted to examine at whom the news media preferred to focus healthcare reform coverage.

Table 5: Frequency of Presidential and Political Party Coverage

	Frequency/Observed N	Expected N	Residual
President	241	286	-45
Political Parties	331	286	45

The expected frequency of these two categories was 286 units. The chi-squared test reported significant differences among the themes at $p < .0001$ ($\chi^2 = 14.161$, $df = 1$, $C = 0.160$). These findings suggest that network news coverage was more concerned with covering the actions and behaviors of republicans and democrats in the House and Senate than those of the President.

Research question 6 was established to examine attention given to different social groups during the healthcare coverage.

Table 6: Frequency of Social Groups in the Nightly Newscast

	Frequency/Observed N	Expected N	Residual
Middle Class	9	5.3	3.7
Labor/Farmers	6	5.3	.7
Underprivileged	1	5.3	-4.3

The expected frequency of these three categories was 5.3 units. The chi-squared test reported significant differences among the themes at $p < .047$ ($\chi^2 = 6.125$, $df = 2$, $C = 0.526$). These results reveal that when networks news coverage discussed the different social groups in America, they focused more on the impact of healthcare reform on the Middleclass, while the underprivileged were almost never mentioned.

The seventh research question was developed as a way to examine distribution of positive and negative framing used by the news media when covering the healthcare issue.

Table 7: Frequency of Positive and Negative Framing in the Nightly Newscast

	Frequency/ Observed N	Expected N	Residual
Positive Framing	531	622	-91
Negative Framing	713	622	91

The expected frequency of these two framing styles was 622 units. The chi-squared test reported significant differences among the themes at $p < .0001$ ($\chi^2 = 26.627$, $df = 1$, $C = 0.145$).

These statistical figures indicate that networks negatively framed content about healthcare reform more than what was expected, while positive framing was significantly lower than expected.

Research question 8 analyzed positive and negative framing techniques with respect to the actions and behaviors of political parties. With political parties receiving more attention than any other actors involved in healthcare coverage, as well as Political Party Politics Negative being the most frequented category, it was appropriate to examine the relationship between positive and negative framing in the coverage of this category.

Table 8: Frequency of Positive and Negative Framing in Political Party Politics

	Frequency/Observed N	Expected N	Residual
Political Party Politics Positive	78	122	-44
Political Party Politics Negative	166	122	44

The expected frequency of these two categories was 122 units. The chi-squared test reported significant differences among the themes at $p < .0001$ ($\chi^2 = 31.738$, $df = 1$, $C = 0.340$). These results reveal that when political parties were discussed by the network news, that the expected frequency of negative framing was much higher than positive framing.

The final research question examined hard news coverage to soft news coverage. Categories that did not discuss the policy of healthcare were considered soft news, with respect to healthcare coverage. Therefore the results of this test were the same as RQ 3, which analyzed policy content to political content.

Table 9: Frequency of Hard News and Soft News Coverage

	Frequency/Observed N	Expected N	Residual
Hard News Categories	374	843	-469
Soft News Categories	1312	843	469

The expected frequency of hard news to soft news categories was 843 units. The chi-squared test reported significant differences among the themes at $p < .0001$ ($\chi^2 = 521.835$, $df = 1$,

$C = 0.486$). These findings suggest that network news coverage of the healthcare issue preferred reporting in the soft-news style instead of the presenting the hard-news of healthcare.

Chapter 5-Conclusion

The media has long defended the notion of the public's right to know and have maintained that they are representatives of the public and therefore responsible "for informing the citizenry about governmental activities" (Day, 2006, p. 40). In other words, the media identify with the responsibility of informing the public of government activities and policies. According to Berkman & Shumway (2003) TV news initially, "was dominated by live coverage of public policy issues" and "TV reporters and anchors generally took great care to avoid sensationalism" (p. 54). Yet, the findings of this study reveal that an overwhelming majority of the Network Nightly News coverage on the healthcare issue focused on the politics surrounding the issue and not the actual policy. When it comes to understanding major policy issues, like healthcare reform, the nightly news networks were far from being as helpful as they could and should be (Farnsworth and Lichter, 2003).

The purpose of this research was to examine how the Network Nightly News covered the healthcare reform issue and determine whether or not the coverage explained the specifics in the policy or concentrated on the politics surrounding the issue. Nearly 70% of coverage focused on politics. The results from *RQ 3* not only revealed a heavy emphasis and preference on reporting political issues before policy, but the breakdown of *RQ 1* demonstrated the degree to which themes on policy lacked attention by the network news stations, when covering healthcare reform. *RQ 2* described exactly what political issues received the most coverage by the networks. In the course of a 30 minute nightly news broadcast viewers were more likely to hear about the strategies that congress was undertaking to get the healthcare legislation passed or discarded, the actions and behaviors of political parties and the president, how healthcare was impacting the president's and congress's approval ratings, the horserace and backdoor deals, and even other

political issues that had nothing to do with healthcare (such as congressional seat races and its impact on the voting power of the Senate and the House, or the issue of unemployment on the president's approval ratings etc). Even with networks labeling healthcare reform as "Obama Care", *RQ 5* showed that networks spent significantly more time covering the actions and behaviors of democrats and republicans over the president. It is possible that these findings are impacted by the size of each group. Congress is composed of 535 members, 100 in the Senate and 434 in the House Representatives, while the president is only one person. Coding did categorize mentions of the "White House" in the presidential category, increasing the potential units for that category. Still, the extreme focus on political parties over the president does suggest an attempt by the network news to keep their coverage impartial.

The overwhelming amount of coverage spent on the political actors, was intensified by the elevated frequency of the loss frame to the gain frame. *RQ 8* established that the network news chose to cover the negative aspects of their actions and behaviors over positive ones. Specifically, when hearing reports about Congress, audiences were hearing loss frame messages that focused on shortcomings, difficulties, burdens, mischief, and criticisms.

This was not only found in the political content but in the limited coverage of the healthcare policy. The findings of *RQ 7*, which looked at positive and negative framing over all themes and categories, not just the particular categories dealing with political parties, ascertained that the coverage of the network nightly news was framed predominately negative. Of the six policy categories that measured positive and negative framing, four were predominately positive. For example, Healthcare Political Authority had 37 positive units and 32 negative units. Controlled Healthcare Economy had 8 positive units and 5 negative. These findings reveal that when networks news covered policy issues reporting was more positive. However, the results of

the political themes are quite the opposite. Of the eight categories used to measure positive and negative framing, five were negative. Not only did this occur with Political Party Politics as discussed above, but Emotional Appeals had 93 negative units and only 47 positive. Negative coverage of political issues outweighed the positive coverage by the networks. With the total amount of coverage centering on political issues, these findings help explain why the overall coverage of the healthcare reform was mostly negative. Had networks spent more coverage on the policy of healthcare, these framing results might have been entirely different.

However, with healthcare being such a politically charged issue, in order to prevent bias, networks news coverage take care to offer equal coverage to all sides of the issue. Although journalists and news organizations strive to remain unbiased and neutral, which is one of the Canons of Journalism (Berman & Shumway, 2003), this research revealed that these attempts do not necessarily result in impartial reporting. Instead loss-framing gradually begins to dominate coverage, which past research has determined is not as persuasive as the gain frame and evokes stronger established attitudes (T Riet et al., 2009, Bizer et al., 2010). In other words, the network nightly news coverage of the healthcare issue only encouraged audiences' current views and attitudes toward healthcare.

The findings of this study also support the current trend of television news "shifting to entertaining or sensational events" (Berkman & Shumway, 2003, p. 54). The extensive amount of time spent covering the political issues surrounding healthcare reform, instead of focusing on explaining the complex subject of how the healthcare system works and what the changes mean for Americans and America systematically, economically, and socially, confirms that network news tends toward soft news reporting. Prior research has determined that soft news coverage does not promote the learning or understanding of major issues (Prior, 2003, Iyengar & Kinder,

1987). *RQ 9* discovered that the extent to which nightly news reported soft news far exceeded hard news coverage. In some cases reports that discussed issues of politics could be considered hard news. However, within the framework of healthcare reform policy these issues become soft news because they are not focusing on the facts involved in the policy, but instead highlight the dramatic stories, actions, and feelings of politicians. American's confusion and lack of understanding of the healthcare reform issue was a direct result of the news media reporting the issue as soft news, focusing on the politics instead of the policy. The choice of the news media to report the simple stories rather than the complex, when it comes to major issues facing our country and its leaders, has serious effects on democracy.

Farnsworth and Lichter (2003) maintain that “democracy depends on a free exchange of ideas and a fruitful discussion of issues among citizens and public officials” (p. 177). The news media is the vehicle that provides the stream of information for discussion. As a consequence of the coverage content of the healthcare issue, this study revealed that dialogue about healthcare reform followed the topics of how the president, democrats, and republicans felt about the bill and their approach to accomplishing their goals toward the reform bill. Only limited amount of discussion was possible with the amount of coverage given to issues on healthcare policy. *RQ 4* explained that network news placed the most attention on the policy issue of cost, while *RQ 6* revealed that a concentration of policy coverage was intended for the Middle Class. The findings of these two research questions support that most, of the limited, policy coverage by the network news stations concentrated on the impact of healthcare on out of pocket cost and taxes for the Middle Class. This reinforces the findings by Funigiello (2005), who maintains that the Middle class has somewhat hindered the lack of progression in healthcare reform. Network news coverage of Obama's healthcare reform reinforced the lack of understanding of different policies

and options of healthcare reform in the middle class and did nothing to eradicate their fear of losing what they already have.

The amount of time the nightly news has to cover certain issues could be a factor in how and what gets covered. The nightly news is broadcasted within a 30 minute time period, which includes commercial breaks. During the duration of the broadcast, coverage time is divided between 3 to 5 segments covering the top issues of the day. These could be issues facing Americans, such as major policy, war coverage, reports on major companies, personal interest stories, etc. or news impacting other parts of the world. Each of these segments has a run time of approximately 3 to 5 minutes. Most coverage of the healthcare issue was reported during one segment of the news broadcast. However, occasionally two segments were used to further discuss the topic. In these instances coverage of the topic fell between 6 to 10 minutes. The longest possible time duration given to one particular topic during the nightly news (10 minutes), appears to be insufficient when attempting to offer quality information on a major policy issue. This could point to the tendency of the news media focusing on simple stories surrounding an issue. An attempt at creating understanding and meaning of such a complex topic as healthcare might only create more confusion if not done properly, which time limitations could impact. However, the study uncovered that political issues that did not even involve healthcare were covered more frequently than any category explaining the policy of healthcare, putting into question the problem of time. By this account, news networks would rather cover simple, dramatic, entertaining stories that do not involve major policy issue than discuss the actual policy itself. In other words, if faced with a complex issue, news networks will not attempt to unpack it, timing limitations or not. Instead, dramatic stories around the issue or entertaining but unrelated details will be covered.

The type of information released to the news media could have also been a factor in the way they covered the health care issue. The press releases from the Obama Administration and Congress on healthcare reform did little to explain the particulars of the legislation. They concentrated on their strategies, opinions, and the back-door deals occurring. There is some validity to the news media only being able to cover as much of an issue as they know. However, journalism has never just been about reporting the facts they are given. In the early years of the free press, much of the focus was on doing what was best financially for the news organization. However, in the early 1900's this thought began to transform and ethical codes were established in order to encourage social responsibility. According to Day (2006), "the pursuit of profits has not automatically contributed to the public good, society has placed increasing demands on corporations to contribute to the correction of social ills" (p. 37). This led to the development of the Social Responsibility Theory.

In 1947 a committee of thirteen distinguished intellectuals, lead by Robert Hutchings, released a report called "A Free and Responsible Press." The objective of the committee and the article they published was to address the future of the free press and the need for a "socially responsible press" (Day, 2006, p. 39). The commission stated in the report that "a free press was vital to democracy, but they cautioned that such freedom was in danger because the press was underserving the public" (Berkman & Shumway, 2003, p. 49). In other words, the press was a threat to democracy if it did not start considering practices that were socially responsible. As a solution to this growing problem the Hutchins Commission proposed five requirements for how the press should deliver the news:

1. Provide a truthful, comprehensive, and intelligent account of the day's events in a context that gives them meaning.

2. Serve as a forum for the exchange of comment and criticism.
3. Project a representative picture of the constituent groups in society.
4. Be responsible for the presentation and clarification of the goals and values of society.
5. Provide full access to the day's intelligence (Day, 2006, pp. 39-40)

According to the results of this study, the coverage of healthcare reform by the network nightly news failed to live up to several of the guidelines established by the Hutchins Commission. First, the coverage was not entirely truthful, comprehensive, and an intelligent account of the day's events. And the coverage was not placed in a context to give it meaning. By focusing on the politics surrounding healthcare reform, the coverage was not reporting the "truth about the facts" (Day, 2006, p. 39) of the healthcare legislation. The meaning and relationships generated were about the players in healthcare reform and not about the policy. Second, the coverage neglected to present and clarify the goals and values of society. Ted Smith maintains that, "journalists have often reported from a vantage point outside the culture, rather than as a part of it", which has led to "a collapse of confidence in the media by the society" (Day, 2006, p. 40). The news media's attempt to be impartial and unbiased prevents them from reporting in a way that encourages the values of society. This trend unfortunately occurred during the coverage of the Healthcare issue. In an attempt to be impartial and reporting from a removed position, coverage of healthcare reform did little to encourage the values and needs of society. Had the news networks reported the issue with these in mind, less time would have been spent discussing politics. With society's values in consideration more time would have been devoted to the policy of healthcare reform and the effect for Americans. Also, the framing of healthcare would have taken on a more positive tone if the network news were considering the values of society. Smith

maintains that coverage tends to be more skeptical and there is more negative reporting when news networks remove themselves from society (Day, 2006). The last guideline that the nightly news failed to uphold in their coverage of healthcare was providing a full access to the day's intelligence. The healthcare coverage went beyond explaining the policy and instead centered on many personal stories, with little relevance to the issue. This type of attention is not interested in reporting what is socially responsibly, but instead feeds public curiosity.

Even if the news media reported the information offered by the government, it is evident by the established Canons of Journalism and guidelines developed by the Hutchins Commission that journalist and news organizations have a responsibility to society to go beyond reporting just the fact they are given. The findings of this study reveal that the network nightly news neglected to be advocates and responsible to society in the healthcare coverage.

So what does this mean for future research? This study concentrated on the nightly news coverage, and though the big three networks were examined, sampling did not support comparing the coverage of the networks. Though "reporters for the Big Three television networks consistently approach news stories from very similar perspectives." (Farnsworth & Lichter, 2003, p. 110) with regards to campaign coverage, a comparative study could determine if healthcare was covered in a similar manner between the three major network nightly news stations. Other types of news could be examined alongside the network nightly news stations. Even though nightly news has the highest viewership, it is on the decline, while cable news viewership is increasing. Expanding this research to include how popular cable show, such as "The O'Reilly Factor", "Hannity", "Larry King Live", and "PBS" would offer a much more realistic and complete picture of how television news covered healthcare reform. Exploring the coverage of newspapers, news radio, and internet news could also be explored as a way to

compare television coverage to other mediums, as well as providing an entire representation of the news coverage on healthcare. Future studies could also investigate how other major policy issues are covered by the news media. Does the news media take the simple and easy reporting road with all major issue, like healthcare and election coverage? Are they failing to report the news in a way that is socially responsible and encourages democracy?

Many critics and scholars (e.g. Lippman, 1922 & 1925, Putnam, 2000, Entman, 1989, McChesney, 2004)), have argued that news media coverage of major political affairs and policy often fails to provided citizens with the information they need to engage in these issues in a thoughtful manner. As this study discovered, it is not only what the news media chooses to cover that is influential but how they choose to cover major topics that can ultimately determine if citizens can be what Lippmann (1925) calls a good, functioning citizen.

Lippmann (1925) and other scholars claim that good citizens are those that have accurate knowledge of the world in which they live and can intelligently act on that world using that information. Information that is only opinion does not make effective citizens, but instead pulls focus toward issues that cannot be acted upon. Lippmann (1925) explains:

Democracy, therefore, has never developed an education for the public. It has merely given it a smattering of the kind of knowledge which the responsible man requires. It has, in fact, aimed not at making good citizens but at making a mass of amateur executives. It has not taught the child how to act as a member of the public. It has merely given him a hasty, incomplete taste of what he might have to know if he meddled in everything. The result is a bewildered public and a mass of insufficiently trained official. (Lippmann, 1925, pp. 138-139)

Healthcare coverage by the nightly network news did just that. Viewers received a smattering of knowledge on the politics surrounding healthcare, a dabble of information on politics not related or relevant to healthcare, and a smidgen of facts about the healthcare policy. An incomplete, irrelevant, and irresponsible coverage that resulted in a “bewildered public”.

The results of this study put into question the future of news mediums like the Nightly News. The current viewership of the Nightly News may still be the highest of any other news program or news source, but it is drastically declining while the others are on the rise. These realities substantiate the possibility that the format of the Nightly News has run its course as a significant news source. The future of news programming has moved in the direction of 24 hour cable news channels and immediate news access via the internet. These types of news mediums offer less restrictions on coverage time and content. Some formats on the internet offer the public the ability to obtain news not only from a variety of sources, but allows them to have instant online discourse as the news is happening. This type of news format encourages a more active and engaged society on major policies and other important issues facing society.

The Nightly News played an important role in getting the news to the public at one time. But things have changed, and the limitations of the Nightly News to others without the limitations have made it a news source that is no longer sustainable. It may not be realistic to think that the Nightly News can provide quality information on complex issues of policy to the public, but can only offer simple, entertaining news stories. If people want more than just entertaining news and want to understand and be fully educated on issues of major policy, they cannot be satisfied with one news source, such as the Nightly News, and need to be willing to be investigative consumers of news.

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Appendix A- Content Analysis Guide

(This guide should be read through before each coding session in order to maintain consistency throughout the coding process)

(Coding sessions should not exceed 3 hours in length)

(No more than 2 coding sessions should be completed in a 24 hour period)

Coding Protocol

1. **Broadcast basic information:** The top section of the content analysis is devoted to recording the basic information about the broadcast watched.
 - a. **Station:** Circle the major network station that the broadcast was originally scheduled. This can usually be found on the top of each transcript; ABC, CBS, NBC.
 - b. **Program Title:** Write the name of the program. This corresponds with the Network; *NBC Nightly News*
 - i. **Nightly News** is a news program that occurs between 5pm-11pm. The program title always incorporates the words “nightly” and “news” and occasionally includes the name of the host. There are broadcast that only cover world and national news and then local broadcast that will also incorporate the local news. For the purpose of this study local nightly news programs will not be covered due to the fact that they are not scheduled on the major networks, just local networks. This study is not looking at local news broadcasts.
 - c. **Program Date:** Write the date of the broadcast; *March 15th, 2009*.
2. **Script:** This section of the analysis is broken down into three steps; *Content Categories, Characters, Coding Problems and Difficulties*.
 - a. **Step 1- Content Categories:**
 - i. **Social Virtue**-The first theme of social virtue contains three categories defined as being concerned with the effects of the healthcare bill on society as a whole. The categories include;
 1. **101-Social Justice in Healthcare:** A concept of equality; need for treatment of all people; Healthcare coverage for all citizens.
 2. **102-Social Harmony:** Appeal for national effort and solidarity; need for society to see itself as united, appeal for public spiritedness; decrying anti-social attitudes in times of crisis; support for the public interest.
 3. **103-Social Responsibility:** need for an accountability to society; being reliable in actions that improve society as a whole with regard to healthcare.

- ii. **Democracy**-Theme number two deals with concepts of democracy. These five categories look at how well the Healthcare issue utilized concepts of the democratic state and the constitution.
1. **201-Healthcare Democracy Positive:** Favorable mentions of democracy as a method or goal concerning the healthcare issue. This would be encouraging involvement of all citizens in decision-making of the healthcare bill.
 2. **202-Healthcare Democracy Negative:** Unfavorable mentions of democracy as a method or goal concerning the healthcare issue. This would be discouraging involvement of all citizens in the decision-making of the healthcare bill.
 3. **203-Constitutionalism in Healthcare Positive:** Support for specific aspects of the constitution; use of constitutionalism as an argument or policy as well as general approval of the constitutional way of doing things with respect to healthcare.
 4. **204-Constitutionalism in Healthcare Negative:** Opposition to the constitution in general or to specific aspects with respect to healthcare.
 5. **205-Social Issues within Healthcare:** Mentions of specific social topics or concerns within Healthcare that may be controversial; *i.e. Abortion*
- iii. **Healthcare Economy**- This theme contains nine categories that describe how the healthcare system affects the economic system.
1. **301-Free Enterprise in Healthcare Positive:** Favorable mentions of free enterprise capitalism in healthcare; superiority of individual healthcare enterprise over state and control healthcare systems.
 2. **302-Free Enterprise in Healthcare Negative:** Opposition to mentions of free enterprise capitalism in healthcare; superiority of state and control healthcare systems over individual healthcare enterprise.
 3. **303-Healthcare Market Regulation:** Need for regulations designed to make private healthcare enterprises work better; actions against healthcare monopolies and trusts, and in defense of healthcare consumers.
 4. **304-Controlled Healthcare Economy Positive:** General need for direct government control of healthcare prices
 5. **305-Controlled Healthcare Economy Negative:** Opposition to a need for direct government control of healthcare prices
 6. **306-Nationalization of Healthcare Positive:** Government ownership of healthcare, partial or complete.

7. **307-Nationalization of Healthcare Negative:** Opposition of government ownership of healthcare, partial or complete.
 8. **308-Welfare State Expansion:** Favorable mentions for a need to introduce, maintain or expand any social service; support for social service such as healthcare.
 9. **309-Welfare State Limitation:** Limiting expenditure on social services such as healthcare.
- iv. **Healthcare Political System-** The fourth theme has six categories that deal with the Healthcare policy and focuses on the procedures and guidelines of the Healthcare system.
1. **401-Healthcare Decentralization:** Support for federalism or devolution; more regional autonomy for healthcare policies and/or the economy; support for keeping up local and regional healthcare customs, systems and institutions.
 2. **402-Healthcare Centralization:** Opposition to healthcare decision-making at lower political levels; support for more centralization in healthcare procedures and policies.
 3. **403-Healthcare Efficiency:** Need for efficiency and economy in healthcare; general appeal to make the process of healthcare cheaper and more effective; issues concerning cost and taxes associated with healthcare.
 4. **404-Healthcare Political Corruption:** Need to eliminate corruption and associated abuse within the healthcare system.
 5. **405-Healthcare Political Authority Positive:** Favorable mentions of strong government within the Healthcare system.
 6. **406-Healthcare Political Authority Negative:** Opposition to mentions of strong government within the Healthcare system.
- v. **Social Groups-** This theme includes three categories with respect to specific economic groups of people and the benefits that policies have for these groups.
1. **501-Labor Groups and Farmers:** Support for the working class, unemployed, farmers; any policy aimed specifically at benefitting these groups.
 2. **502-Middle Class and Professional Groups:** Favorable references to middle class, professional groups such as physicians, lawyers, etc.; any policy aimed specifically at benefitting these groups.
 3. **503-Underprivileged Minority Groups:** Favorable references to underprivileged minorities who are defined neither in economic nor demographic terms (e.g. handicapped, homosexual,

immigrants, etc.); any policy aimed specifically at benefitting these groups.

- vi. **Human Politics-** This sixth theme concentrated on the human politics occurring in conjunction with the healthcare issue. These twelve categories look at the politics and strategies of people or groups of people in political and/ or authority positions.
1. **601-Presidential Politics Positive:** Favorable mentions of the president's actions and behaviors in conjunction with the healthcare issue.
 2. **602-Presidential Politics Negative:** Unfavorable mentions of the president's actions and behaviors in conjunction with the healthcare issue.
 3. **603-Political Party Politics Positive:** Favorable mentions of the actions and behaviors of members of congress, republicans and/or democrats with respect to the healthcare issue.
 4. **604-Political Party Politics Negative:** Unfavorable mentions of the actions and behaviors of members of congress, republicans and/or democrats with respect to the healthcare issue.
 5. **605-Political Horse-race:** References to the shift in control and influence between the major political parties and/or candidates representing those political parties; debates of which side is right or wrong on the healthcare issue.
 6. **606-Backdoor/Under-the-table Politics:** Mention of silent deals, bargains, and/or mutual understandings between political parties, presidential administrations, etc. with private cooperation's in regards to the healthcare bill.
 7. **607-Insurance Companies Positive:** Favorable mentions of the actions and behaviors of health insurance companies.
 8. **608-Insurance Companies Negative:** Unfavorable mentions of the actions and behaviors of health insurance companies.
 9. **609-Political Approach/Strategy to Healthcare Positive:** Favorable mentions of the political methods and strategies by the president, congress, healthcare providers, and/or others with regard to healthcare.
 10. **610-Political Approach/Strategy to Healthcare Negative:** Unfavorable mentions of the political methods and strategies by the president, congress, healthcare providers, and/or others with regard to healthcare.

11. **611-Emotional Appeals to Healthcare Positive:** Favorable references to emotions, feelings, dreams, and memories regarding healthcare.
 12. **612-Emotional Appeals to Healthcare Negative:** Unfavorable references to emotions, feelings, dreams, and memories regarding healthcare.
- vii. **Other Politics-** This theme looks to capture the political issues and actions that are discussed during a broadcast that has no reference to healthcare.
1. **701-President Other Positive:** Favorable mentions of the president's actions and behaviors with regard to issues other than healthcare.
 2. **702-President Other Negative:** Unfavorable mentions of the president's actions and behaviors with regard to issues other than healthcare.
 3. **703-Political Party Politics Other Positive:** Favorable mentions of the actions and behaviors of members of congress, republicans and/or democrats in conjunction with issue other than healthcare.
 4. **704-Political Party Politics Other Negative:** Unfavorable mentions of the actions and behaviors of members of congress, republicans and/or democrats in conjunction with issue other than healthcare.
 5. **705-Political Issues Other Positive:** Favorable mentions of important political issues other than healthcare. *i.e. The Economy*
 6. **706-Political Issues Other Negative:** Unfavorable mentions of important political issues other than healthcare. *i.e. The Economy*
- b. **Step 2- List of Characters**
- i. **Characters** can be a person, thing, event, or concept that a narrative focuses on. The major characters can be determined by the attributes in the broadcast. If a broadcast appears to have more than one major character, only mark the 3 major ones. Characters are chosen if the majority of the content from the thematic categories concern those topics/person/groups/etc. as well as refer to the actions and behaviors of each with relation to the healthcare issue. The character categories comprise of:
1. *Healthcare Bill*
 2. *President*
 3. *Congress*
 4. *Republican Party*
 5. *Democratic Party*
 6. *American People*

7. *Other* (this section was created for a catch all for mentions of other people, concepts, ideas, movements, etc. that concern the healthcare issue but might only be discussed in a single broadcast.)

Once the major characters have been determined, whether or not the broadcast is a **policy narrative** can be answered. If the major character in the broadcast is the Healthcare Bill then “YES” should be circled under policy narrative. If the major character is not the healthcare bill but something or someone else then “NO” is circled under policy narrative.

3. Coding Problems and Difficulties

There may be times during coding that a quasi-sentence doesn't appear to fit into one of the intended categories. Budge et al (2001) developed several options for dealing with these issues that, several (decision 1, 2, 3, & 4) but not all, are also appropriate for this study (p. 28-33). Difficulties may involve:

- d. No category applies.
- e. More than one category applies.
- f. The category is unclear.

i. No category applies

The 35 categories created for the coding of broadcast coverage on the healthcare issue attempt to describe the content however it may not be exhaustive. There are possibilities that content covers issues that are not of interest for the purpose of this study or that the category in question is rarely used. These types of categories are important to address whether relevance is discovered. In order to handle content that doesn't fit into any of the generated categories three rules were designed.

1. Decision Rule No. 1: Checking Definitions of all Categories in Policy Domains

Whenever tempted to treat a quasi-sentence as uncodable, repeat reading the definitions of categories in the relevant policy domains because it might well be that the quasi-sentence contains a policy position that is taken only seldom. Therefore, the specific definition of the respective category may just have been forgotten.

2. Decision Rule No. 2: Identifying Connecting Sentences

Some sentences, which may otherwise be uncodable, may just be connecting sentences between two actions (for instance: Therefore, we are going to do three things.) These connecting sentences themselves do not constitute meaningful action but are part of an on going action. Therefore, connecting sentences should be coded in the same category as surrounding sentences or as the bulk of the paragraph they appear in.

3. **Decision Rule No. 3: Creating Subcategories**

Look at all uncoded sentences a second time and try to figure out whether some of these statements have an equivalent meaning. Make sure that there really is no related category that captures the sense of these quasi-sentences. Should many quasi-sentences contain the same action which are not subsumable under one of the 35 categories, note down a temporary 3-digit code and a temporary definition for a new subcategory and contact the supervisor. Do not create subcategories for each and every single issue because this is useless. Never create new categories without checking with the supervisor because you may destroy the comparability of the data.

ii. **More than one category applies**

Occasions may arise when it seems that a quasi-sentence fits into more than one category. If this takes place the following rules should be practiced.

1. **Decision Rule No. 4: Broadcast Headings as Guidelines**

Look at the broadcast heading of the quasi-sentence in question. Then, take the category which covers the topic of the broadcast. Thus, broadcast headings are taken as guidelines for coding although these headings themselves are not to be coded.

2. **Decision Rule No. 5: Conflicting Framing and Language**

Occasionally the frame of a message contradicts the language use. For example, the message might be framed negatively but the language use is positive language. In these instances the framing always trumps language. If a broadcast frames the message negatively but uses positive language the sentence should be coded as negative.

iii. **The category is unclear**

Even after applying decision rules 1 through 5, it may still be uncertain of the direction of the action. Reading an entire paragraph at a time can solve some of these problems because these quasi-sentences may fit within the context of the entire paragraph. However, if coders are unclear these sentences should be coded as such. Conclusions should not be made as to what the coder thinks the sentence is alluding to and instead should code what the statement says.

Appendix B- Coding Sheet

Station: **ABC** **CBS** **NBC**
 Program Title: _____
 Date: _____

Content Categories

Theme 1- Social Virtue

- 101- Social Justice in Healthcare
- 102- Social Harmony
- 103- Social Responsibility

Theme 3- Healthcare Economy

- 301- Free Enterprise in Healthcare Positive
- 302- Free Enterprise in Healthcare Negative
- 303- Healthcare Market Regulation
- 304- Controlled Healthcare Economy Positive
- 305- Controlled Healthcare Economy Negative
- 306- Nationalization of Healthcare Positive
- 307- Nationalization of Healthcare Negative
- 308- Welfare State Expansion
- 309- Welfare State Limitation

Theme 5- Social Groups

- 501- Labor Groups and Farmers
- 502- Middle Class and Professional Groups
- 503- Underprivileged Minority Groups

Theme 7- Other Politics

- 701- President Other Positive
- 702- President Other Negative
- 703- Political Party Politics Positive
- 704- Political Party Politics Negative
- 705- Political Issues Positive
- 706- Political Issues Negative

Coding Problems and Difficulties

- 000- No Categories Apply
- 001- More Than One Category Applies
- 002- Category Is Unclear

Theme 2-Democracy

- 201- Healthcare Democracy Positive
- 202- Healthcare Democracy Negative
- 203- Constitutionalism in Healthcare Positive
- 204- Constitutionalism in Healthcare Negative
- 205- Social Issues within Healthcare

Theme 4- Healthcare Political System

- 401- Healthcare Decentralization
- 402- Healthcare Centralization
- 403- Healthcare Efficiency
- 404- Healthcare Political Corruption
- 405- Healthcare Political Authority Positive
- 406- Healthcare Political Authority Negative

Theme 6- Human Politics

- 601- Presidential Politics Positive
- 602- Presidential Politics Negative
- 603- Political Party Politics Positive
- 604- Political Party Politics Negative
- 605- Political Horse-race
- 606- Backdoor/Under-the-table Politics
- 607- Insurance Providers Positive
- 608- Insurance Providers Negative
- 609- Approach/Strategy to Healthcare Positive
- 610- Approach/Strategy to Healthcare Negative
- 611- Emotional Appeals to Healthcare Positive
- 612- Emotional Appeals to Healthcare Negative

Appendix C- Example Broadcast Transcript

ABC World News- March 3rd, 2010

Good evening./ After one full year, this week of wrangling about healthcare reform,/ president Obama said today its over. /Times up./ He demanded that republicans and democrats in Congress stand up/ and be counted in a vote./ And let's go straight to Jake Tapper./ He is at the White House./ With the president saying its time to act /and he'll face the political consequences, Jake?/

That's exactly right, Diane./ The president seemed assertive/ and fired up./ And after his remarks/ he went back to the Oval Office where he told and aid,/ I feel good about where we are./ For the first time in his year long debate,/ the president said the time for talk is over./

Every idea has been put on the table. /Every argument has been made. /Everything there is to say about healthcare has been said. /I believe the United States Congress owes the American people a final vote on healthcare reform./

Flanked by medical professionals in T.V. friendly hospital clothes,/ the president said the legislation will cover the uninsured,/ bring down healthcare costs,/ and end the worst practices of insurance companies, /such as denying coverage because of pre-existing conditions./

It incorporates the best ideas from democrats and republicans./ Including some of the ideas the republicans offered during the healthcare summit./ My proposal would give uninsured individuals and small business owners the same kind of choice of private health insurance/ that members of congress get for themselves./ Because if its good enough for members of Congress,/ it's good enough for the people who pay their salaries./

The president painted a picture of a world without reform, /skyrocketing premiums, /millions more uninsured,/ a government deeper in debt./ And he told the story of a woman with recurrent breast cancer,/ whose medical bills had landed her family in debt./

This should not happen in the United States of America./ And it doesn't have to./ I do not know how this plays politically/ but I know its right./ And so I ask Congress to finish its work./ And I look forward to signing this reform into law./ Thank you very much everybody./ Let's get it done./

Diane, right now there are not the votes in the House of Representatives to pass this legislation./ So president Obama will hit the road Monday/ to campaign for the legislation,/ starting with Philadelphia and St. Louis in swing states Pennsylvania and Missouri./

Ok Jake./ Let's get the word now from the bottom line itself./ George Stephanopoulos is here with us./ So the presidents really ready to face an up or down vote./And which do you think it's going to be?/

Well, there will be an up or down vote./ The truth is the top strategist in the White House, the Senate, and the House simply don't know./

If they can get the votes,/ they put the odds at about 50/50 right now./

And tell me what has to be resolved /before they can even get to that point./

There are questions of both process and policy, Diane. /And the process House members are really suspicious of the Senate./ They don't want to take a vote right now/ unless they are guaranteed the Senate's going to pass it /once they pass the bill./ So they have to find a way around the House rules./ Second, question's of policy./ Right now as Jake said, they're short./

About 10 votes short./ Most of the yes votes that are now undecided/ are corralled around the issue of abortion. /Unless those people can get some assurance that there will be no public funding for abortions, /they could switch from yes to no./

President wants it by the end of the month?/

He wants it by the end of the month./ Not clear that he is going to get it./ In fact, strategists hope they can get it through the House by then, /don't believe it will get through the Senate./

Got to ask you about something else./ Congressmen Charlie Rangel of New York./ Powerful, immensely powerful chairmen of the House/ is stepping down as chairman./ What does this mean?/

It means a lot. /That is the tax writing committee of the House./ Healthcare goes through that committee of the house. /40 year veteran, /powerful member of the House, as you say./ He says he temporarily is stepping aside. /But he has resigned as chairman of the House. /And this is a real blow to the democrats./