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Topics for Our Times

Editorials and Topics for Our Times

Editorial: Whatever Happened to Politicians' Concerns about the Nation's Uninsured?

According to the US Census Bureau, 42 million Americans were without health insurance in 1996.¹ The new children's health insurance law should, over time, help reduce that number. However, there are limits to what can be expected. Three fourths of the uninsured are adults and are not eligible for the program. In this issue of the *Journal*, 3 articles document the health problems faced by underserved populations and raise the issue of the need for action.²⁻⁴

As we approach the 1998 congressional elections, those of us who care about the public's health wonder why most politicians no longer seem to be concerned about the nation's uninsured. Few Americans believe that the problem of the uninsured has improved in recent years. At the time of the 1996 elections, 6 in 10 voters (60%) thought that the problem of Americans' not having health insurance was greater than it had been 5 years earlier; only 7% saw it as less of a problem, and 30% thought it was about the same.⁵ In more general terms, a 1997 poll found that only 1 in 6 Americans (16%) think that the country has been making progress in health care. A majority (54%) think that the country is losing ground.⁶

Given the persistence of the problem and the public's awareness that it is not getting better, why is the issue of the uninsured largely missing from the 1998 election agenda?

Two reasons come to mind. First, Americans are telling pollsters that they are currently more concerned about strengthening Social Security and reducing the federal debt than they are about additional spending on federal programs. When asked in January 1998 to choose among 4 ways to use the projected surplus in the federal budget, 39% of those polled wanted it used to strengthen Social Security, 29% wanted it

used to reduce the national debt, and 16% wanted it used to cut income taxes; only 14% preferred to see it used for increased spending on other domestic programs.

Second, Americans do not rank the health care issue as high on their list of priorities as they did during the reform debate of 1993 to 1994. In October 1997, only 12% of those polled named health care (excluding Medicare) as one of the two most important problems for government to address, compared with 45% in February 1994 and 55% in August 1994, when health care led the public's list of priorities for government action (Table 1). Education has replaced health care as the top area where Americans want government action and additional spending.⁸

So there seems to be a paradox in popular opinion: many Americans see a problem that they believe is getting worse, but they do not seem to want government to take the lead in solving it.

Part of the reason for this paradox is probably the residual effect of government's failure to enact major health care reform legislation in 1993 and 1994. By the end of the debate, many people believed that major reform could actually be harmful to the average person. For example, on 4 separate measures of what the Clinton reform plan might accomplish, most Americans did not see themselves as better off if the plan became law. On 3 of the measures, a majority or plurality thought they would be worse off: 63% said that there would be too much government involvement under the plan; 54% believed that the amount of money they would pay for medical care would increase (only 17% thought that it

Editor's Note. See related articles by Rosenbaum et al. (p 357), Avruch et al. (p 445), and Takeuchi et al. (p 451) in this issue.

TABLE 1—Percent of Americans Naming Health Care as One of the Two Most Important Problems for the Government to Address, 1993 through 1997

Month, Year	%
January 1993	31
June 1993	29
February 1994	45
August 1994	55
February 1995	25
September 1995	18
April 1996	16
January 1997	11
May 1997	10
June 1997	9
August 1997	11
October 1997	12

Source: Harris poll.⁸

TABLE 2—Percent of Americans Who Say They Trust the Federal Government to Do the Right Thing Just about Always or Most of the Time

Year	%
1958	73
1964	76
1968	61
1972	36
1976	33
1980	25
1984	44
1988	41
1992	29
1994	21
1997	22

Source: Center for Political Studies, *American National Election Studies* (1958 through 1994)¹⁰; ABC News poll, 1997.¹¹

would decrease); and 48% said that they would have less choice of doctors (only 16% thought that they would have more choice). A plurality (40%) thought that the quality of care available to them would remain the same, but twice as many people (39%) expected a decline in quality as those (20%) who expected an increase in quality.⁹

An equally important factor is the public's general cynicism about government. Trust in the federal government to do the right thing is near its lowest level in the 40 years that polls have asked the question (Table 2).^{10,11} A recent survey found that only 22% of Americans trusted the federal government to do what is right "just about always or most of the time," barely one third the level of 30 years earlier.¹¹

Americans also do not have much faith in the federal government's ability to solve problems. Six in 10 (61%) say they have just a little or no confidence at all that when the federal government decides to solve a problem, the problem will be solved.¹²

Confronted with this climate of public opinion, what can public health professionals do to address the problem of the uninsured? First, public health professionals need to spend more time and effort to bring the issue back on the public's agenda. To do this, they have to find ways to attract the media's attention to the problem and its potential solutions. Faces and names need to be put on the 42 million Americans who are currently without health insurance. The problems and experiences of these Ameri-

cans when they are sick must be made more visible and understandable to the public.¹³ Also, as years of public health work have shown, advocacy efforts can really count on issues like these. Efforts should include letters to the editor, forums, and appearances on media talk shows, as well as letter-writing campaigns and contacts with public officials urging them to act on this issue.

Second, public health professionals should create proposals that take into account the current public mood, with its strong tinge of anti-government sentiment. Although health care did not rank very high on the list of election issues, voters did show interest in providing health insurance to uninsured children.⁵

Incremental efforts to expand coverage respond to the mood of the day. The recently enacted children's health legislation may be a model for the best we can expect in today's environment. We learned from the health care reform debate of 1993 to 1994 that there is no consensus among the public or among interest groups on the best way to expand health insurance coverage or control costs. The children's health bill was enacted with the recognition of this lack of consensus. Individual states were given a range of choices about how they could deal with coverage and cost within each state's own political culture.

This pluralistic approach may not be ideal from a health policy perspective, but it

does offer a blueprint for responding to one of America's most serious public health problems in an era of strong anti-government feelings. □

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