

Using MAXQDA to code for the frames used by U.S. Presidents and media samples surrounding federal health care policy reform

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Abstract

My Ph.D. dissertation addresses the contentious issue of American health care reform policy through systematically uncovering the types of frames used by both presidents and media samples at 3 critical junctures in U.S. history. Framing literature has been growing rapidly as political science and political communication scholars seek to understand the power structures that shape policy and public opinion (Entman 2004). Empirical studies conducted on media framing of policy issues confirm the importance of framing scholarship and the existence of opposing viewpoints in public discourse (Dorfman et al., 2013). Frames are used by politicians and media elites to discuss and problematize health care reform. Some of the most prominent frames in health care reform policy include the human rights vs. market commodity frames, raising the question of whether health care is a human right or a privilege; whether every person should have access to it, or whether it is primarily a good to be purchased. Individualism, Collectivism, States' rights and Federalism are further major ways in which health care is problematized in American public discourse. MAXQDA supports the transformation of these discourses into frames through a deductive and inductive process.

Methods and Code System

All relevant Presidential speeches (specifically addressing health care reform) from the Johnson, Clinton and Obama presidencies were selected for each of the 3 time periods through the American Presidency Project database. Similarly, media samples were retrieved from Proquest (NYT) searching +1-1 day from each speech delivered, and the top 4 were selected sorted by relevance. The "Overview of Memos" function in MAXQDA was used extensively to track patterns in the speeches and media samples.

Research Process: Creating the Codes

The coding process began starting with 6 deductive categories, which were the six major discourses on health care. Over 30 categories developed inductively through reading texts. Re-grouping these codes into 5 overarching parent codes creates the main "frames". To simplify: Six major discourses (Rights, Market, Individualism, Collectivity, Federalism and States) → applied deductively to texts → reworked into inductive frame categories (parent codes)

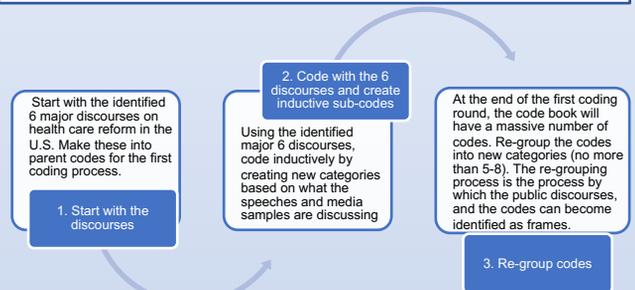


Figure 3. Coding Process

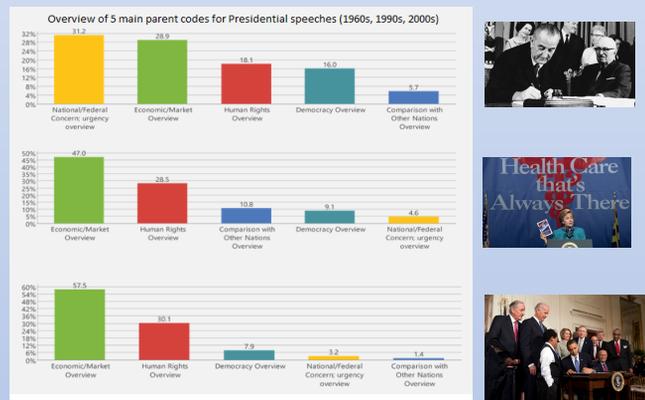


Figure 4. Overview of Parent Codes showing frames

Code System	Injustice	Economic/Market ...	Cost of healthcare	SUM
Overview of 5 main parent codes				0
Human Rights Overview	79	40	116	235
Injustice	17	17	51	68
Economic/Market Overview	57	213	277	547
Economic/Market "The economy" or Cost of healthcare	17	65	65	147
SUM	204	335	509	1,048

Figure 5. Code Co-Occurrence indicating "Frame Interaction"

Discussion

MAXQDA is a tool that can be systematically used to conduct a frame analysis, demonstrating in this case how health care is framed through presidents and media samples – and demonstrating the co-occurrence or interaction of certain frames that appear in combination with others. MAXQDA can bridge a much-needed gap in methodically helping frame analysis to become a more objective study.

Throughout the course of the 3 junctures (1960s, 1990s and 2010) the speeches analyzed show a trend of presidential framing of the issue primarily as one of cost control.

The code co-occurrence or "interaction" between the frames is one of the most relevant findings, as it supports the notion of mixed framing; using more than one frame to advance a message.

Systemically coding speeches and media samples allows media and political communication scholars to work towards developing new models of policy issue framing.

- Code System
 - Overview of 5 main parent codes
 - Human Rights Overview
 - Human Rights
 - This is about people's direct quote or anecdote
 - Quality
 - Deservingness
 - Fairness
 - Injustice
 - Wants and needs
 - All Americans - collectivism
 - Economic/Market Overview
 - Economic/Market (the economy) or specific mention of market
 - Employment
 - Poverty
 - Federal deficit
 - Cost of healthcare
 - Small businesses
 - Comparison with Other Nations Overview
 - Positive comparison
 - Negative comparison
 - Comparison with Other Nations
 - National/Federal Concern; urgency overview
 - Government as a benefactor - constructing or funding
 - State responsibility
 - Government as a negative
 - National/Federal Concern; urgency
 - Democracy Overview
 - Personal responsibility
 - Choice
 - Freedom as health care
 - Patriotism
 - Liberty
 - Strong community
 - Concept of "nationhood"
 - Democracy
 - Inductive Codes from Initial Analysis
 - What is the solution?
 - Bipartisanship
 - General solution
 - Consensus/cooperation
 - Health security
 - Education
 - Democracy
 - Universalism
 - Who is being affected? Recipients/beneficiaries/victims
 - Elderly
 - Uninsured Americans
 - Migrant workers
 - Mental health patients
 - Youth/children
 - What is the problem?
 - Preexisting conditions
 - Wastefulness, bureaucracy
 - Urgency
 - What kind of progress has already been made
 - What is the problem?

Figure 1. Code System: Parent and sub-codes

Memo

Document: Sept-26-1993 (article 1) Linked codes

Title: Sept-26-1993 (article 1)

Author: Betsy Last changed: 2019-01-25 1:15 PM

Type: [Icons]

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This article discusses problems President Clinton will face with lawsuits, also specifically mentioning that he used health care experts but not legal experts in trying to draft health care reform. Paraphrasing this article: Clinton said that Americans would have a right to health care, but a right without a means to enforce it is practically meaningless. I coded this as neutral, because the author isn't giving their personal opinion. But, there is nothing positive about this article. The political situation is dire and the author warns the plan will fail.

Figure 2. Using MAXQDA's memo function to summarize and keep track of hundreds of media samples