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Bryan Kroetsch

John Carroll University, bkroetsch14@jcu.edu

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The New Right Discourse on Health Care

Bryan Kroetsch
John Carroll University ‘14

This paper is an analysis of the “New Right” response to the Obama Administration’s Affordable Care Act. It discusses how language has been used by a New Right wing faction to dictate the discourse on health care in the United States while at the same time motivating the citizenry to be fearful of health care and large, bureaucratic government.
Discourse

I perceive the “New Right” to be a right-wing faction that has used a conservative message and rhetoric to turn the ordinary American citizen against the policies of the Obama Administration and the Congress. The New Right is “right of right” meaning that it is far from the mainstream form of thought and rhetoric and has pushed the boundaries to unprecedented limits in conservatism. They have altered and distorted language to affect the existing discourse and create their own. Through a series of talking points and buzzwords, The New Right has lead the citizenry to believe that the Affordable Care Act is something that they must fear.

Language is sometimes used as a means to usurp power or change the way people think. Michel Foucault developed a form called Foucauldian Discourse Analysis, which focuses on power relationships expressed through language. It is a theme of Foucault’s theory of biopolitics, which focuses on one subject oppressing another subject. Discourse analysis works the same way here- it creates a form of power as one subject speaks to another, forming mastery over it. Foucault is quoted as stating

What makes power hold good, what makes it accepted, is simply the fact that it does not only weigh on us as a force that says no, but that it traverses and produces things, it induces pleasure, forms knowledge, produces discourse. It needs to be considered as a productive network that runs through the whole social body, much more than as a negative instance whose function is repression.¹

Power can be seen as the factor that forces the discourse of the New Right into the minds of millions of Americans. The New Right possesses a power- whether in the halls of Congress, town hall meetings across the country, or at grassroots rallies across the country. They have the pulpit and produce a discourse with it. The New Right is able to motivate people to oppose the Affordable Care Act by means of a fear campaign. So, they induce people into believing that

President Obama is “up to no good” with his policies and make them feel as though they should be afraid. This is a stimulating exercise for the normal American who doesn’t spend much time focusing on politics. Out of a recent survey of 1.2 million Americans, only four percent were considered “active news readers”. Certainly some of these readers and some of the citizens who aren’t buy into the power relationship because they simply have no knowledge of policy other than what they hear. Those who aren’t actively reading hear sound bites and pieces of arguments and have to make their minds up through that medium. Unfortunately, these sound bites aren’t enough for Americans to get a decent idea of the issues, as the average has shrunk to just under eight seconds all the way from 43 seconds in 1968. Due to the marginalization of information, the New Right can control the shortened message and master an audience that isn’t paying close attention to the state of politics.

Norman Fairclough has also written extensively on the relationship between discourse and power. He speaks of a “hidden power” generally in respect to mass media. For this purpose, I’d like to refer to the New Right movement as a part of mass media. A lot of this discursive argument is made by talking heads on Fox News such as Sean Hannity and by guests on shows like his such as Karl Rove and Sarah Palin. Fairclough refers to the “one-sidedness” of mass media hidden discourse. He states

In face-to-face interaction, participants alternate between being the producers and the interpreters of text, but in media discourse, as well as generally in writing, there is a sharp divide between producers or interpreters- or, since the media ‘product’ takes on some of the nature of the commodity, between producers and consumers. (p. 49).

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2 The New Yorker, who defined an “active news reader” as someone who read at least ten substantive news articles and two opinion pieces in a three-month period, took this survey. (http://www.newyorker.com/online/blogs/elements/2014/01/doesnt-anyone-read-the-news.html)
3 Fehrman, Craig. “The Incredible Shrinking Sound Bite”. Boston Globe
4 Fairclough, Norman. “Language and Power”
Fairclough’s theory has allowed me to deduce that viewers of the New Right media are essentially consumers. Most Americans aren’t terribly interested in politics. They prefer sound bites or short articles to try to gain a handle on what’s going on in the political world. In other words, they aren’t as politically in tune as students of the discipline or even casual readers of the newspaper. It’s just a part of their life that, despite having major implications, isn’t terribly important in the grander scheme of working or raising a family. So, when they do view political media, they’re passively consuming it the way they do YouTube videos or a fast-food meal. The consumption of political media is tantamount to eating a fast-food meal in the respect that is quick and done with little effort. It’s marketed on to the average American who isn’t watching closely as the solution to the problem. The problem with that is the amount of misinformation the consumer can be given by a producer of media occurs with nobody available to rebut the producer. There is nothing face-to-face about hidden discourse- it’s consistently able to paint the ACA as a “straw man” and knock it down. He goes on to remark “the producers have power over the consumers in that they have the sole producing rights and can therefore determine what is included and excluded, how events are represented, and even the subject positions of their audiences.” (p. 50). These people are clearly in a powerful position. They have the ability to shape an argument and even control the way people think about it. The use of fear as an instrument, constructed through language, is exemplary of the New Right’s ability to frighten the American public. A certain indoctrination has occurred where the New Right has marketed their style of politics through fear, short sound bites, and sharp arguments to reach Americans all across the country.
While the choice of living without a health care plan is risky, in an individualistic, capitalist society, not having a health care system is plausible. People who believe in rugged individualism and think that the government shouldn’t be able to make the citizen do anything could skip paying for health care- after all, if something doesn’t benefit the consumer in a capitalist system, there is often no reason to do it. Health care has been boiled down to an economic issue rather than a moral one. Logically it would seem people would forego health care plans only in the interest of saving money. There are benefits to having a health care plan, though. Having a health care plan is similar to investing in a 401k or putting money away for retirement- while one won’t use it now, a health care plan will probably become necessary down the road. Health care should be viewed in the same light- even if not needed immediately it will be necessary later on. Nevertheless, some citizens take the risk of not having health insurance.

Deborah Lupton defines “risk” as “the product of the probability and consequences (magnitude and severity) of an adverse event.” (Lupton, p. 18). Lupton then explains how, then, people themselves assess risk. She states

It has been found by psychometric researchers that lay people are more likely to calculate that risk is likely to occur if information related to it is available and easily recalled, and tend to overestimate risk related to circumstances where it can be easily imagined as happening to oneself. (p. 20).

Lupton’s theory means then that people can be influenced into believing a risk can occur if there’s information out there, and they’ll be more fearful of risk if they can see it happening to themselves. According to Lupton, individuals tend to have a ‘it will never happen to me’ mentality, so buying health insurance in case you come down with cancer might seem silly to some. People tend to be more afraid of things that they’re less familiar with. Lupton cites a

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5 Lupton, Deborah. “Risk”
A psychometric study where people were asked to assess the severity of random day-to-day things and much ‘larger’ things. (p. 20). People tended to answer that things like microwaves and alcohol aren’t so risky, while nuclear war and ozone loss are particularly dangerous. People seem to be much more afraid of lofty, far off things than things that effect them in the present. Lupton breaks down an epistemology on risk, asserting that there are a few different schools of thought: strong constructionist, weak constructionist, and realist. Strong constructionists tend to believe that nothing is a real risk; it’s all relative to how we view something. In that way, cancer isn’t really a risk it’s just perceived to be so because of “ways of seeing”. (p. 35). Weak constructionists believe that “risk is an objective hazard” that is mediated through social or political cultures, and realists believe that risk is objective but may be distorted or biased through social and cultural frameworks. (p. 35). If these are to be the three groups, it is plain to see why some people wouldn’t purchase health insurance. Some people don’t see risk and others see risk as a systemic bias- perhaps something that one is made to believe. People could, conceivably, deny the dangers of illness because they believe it isn’t very prevalent.

At the same time, individuals may risk foregoing a health care plan because the New Right has indoctrinated them to believe that the Affordable Care Act is an evil piece of legislation that must be avoided at all costs. One could make the assumption that people who are against the policies of the President may wish to avoid joining his health care program. Brainwashing behavior that leads people to believe no risk exists could very well cause this.

Lupton continues her discussion later on remarking how risk doesn’t always have to carry a negative connotation. She states, “Against these dominant discourses on risk, however, there also exists a counter-discourse, in which risk taking is represented far more positively.” (p. 148). This would be the notion of risk to gain pleasure. Risk isn’t always about the avoidance of
negative consequences; it can also be about gaining something pleasurable in Lupton’s opinion (p. 149). In respect to health care, a realm where not much pleasure can be gained from having a health care plan, it’s understandable how some people don’t think having a plan is worth it. There’s nothing to be gained other than piece of mind, and in a society that expects to benefit from everything it may come across as unnecessary to have “insurance” in case something bad happens one day. Looking at risk from the counter-argument, I suppose it’s understandable why some people might skip over having a plan all together.

In conclusion, when it comes to risk people have different ideas on what is good and what is bad. Some seem to believe that something ‘won’t happen to me’ so there’s no reason to have insurance. Others might not see the reward in having a plan since illness is so lofty and far away when one is healthy. If people are lead to believe they can assess risks for themselves, they may choose to forego health care as an unnecessary external cost.

Statistics

Since this paper has started from the assumption that universal health care is desirable, I think it is important to clarify why I think it is an important thing to have. Recent estimates by the World Health Organization state that health care in the U.S. uses up 17.6 percent of the country’s GDP, all while about 1 in 6 Americans do not have health care coverage. GDP or gross domestic product is the value of all officially recognized final goods and services of a country in a given year. This number is massive and can be cut by altering the policy program on health care. Comparatively, countries in Western Europe spend much less of their GDP on health care, and are able to extend coverage to all of their citizens. I believe that this lies in a lack of a public option, something that distinguishes our system from other health care systems around the world. A public option is a government run health insurance program that would
compete with other private health insurance companies to offer people who make less a better opportunity to afford a health care plan.

Other countries that are normally compared to the United States spend much less on health care and get much more out of it. Switzerland spends the next highest amount on health care in the world behind us, spending just over 11 percent. However, Switzerland extends health care coverage to all of its citizens while the United States does not. The World Health Organization has ranked the U.S. 37th in the world in health care, far behind countries that it often considers its peers in world affairs. The U.S. Census says that 48.6 million Americans go daily without health care, and every year about 48,000 people die because they lack health care. This is changing now as people are officially applying for ACA benefits, but to this point there have been many Americans who went without health care, either because they didn’t trust the system in place or because they could not afford it.6

The United States spent about $8,362 per capita in 2010 on health care, much higher than the next closest nation, Norway, which spent just over $5,000 per capita.7 These costs are high with a low return on the investment. It is the case that the United States is the only country in its peer group that doesn’t provide health care for its citizens, and will even allow citizens to go without care or even into bankruptcy over health care. Many Americans have been forced to make choices that put themselves in financial duress without any other options. If health care costs continue to rise at this rate, the Obama administration asserts that nobody will be able to afford it at all or it will deepen the economic crisis. It is clear from the evidence that something must be done to curb the cost of health care.

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6 All figures from World Health Organization (http://www.who.int/countries/usa/en/)
Often times the argument is made that our health care is better here in the United States, or comes with a more “customer service” type background where citizens get the care they need right when they need it. It is important to view the public opinions of Europeans about their systems. The Journal of Internal Medicine (2012) article shows that Europeans think more highly of their health care systems than Americans do of their own. The healthcare is more accessible in some European countries as well. The article shows that in Switzerland, a country with universal coverage, citizens receive 69% of recommended care while in the U.S. the patients receive about 55% of recommended care (p. 727). So, people are not even getting all of the care that they need in the U.S. today. This shows that despite American exceptionalism, the United States is behind many other countries on the progression of health care programs.

An economic argument made by the New Right is that doctors will not be paid to the same standards that they used to be prior to the passing of the ACA. Comparative to the U.S., the United Kingdom spends about $3,433 dollars per capita on health care each year. This is a much smaller number, and the doctors are paid almost equally to what they are paid here in the U.S. The money that is being charged for these health insurance plans isn’t going to the doctors who conduct health care, but is instead going to insurance companies that drive up the costs of care in order to profit. Yearly, England budgets about 109 billion pounds on health care, which is equivalent to about $169 billion USD. There are less people living in England, but if the U.S. spent at that rate they’d spend much less- since we currently spend almost a 5th of our GDP on health care. The Affordable Care Act is designed to combat the costs of ambulances for people who are uninsured because it will prevent free riders, which is a start. The hope is that this sort of “shared responsibility” will bring costs down across the board. So as the numbers reflect, we

8 “The Quality of Primary Care in a Country with Universal Health Care Coverage” Journal Internal Medicine
spend a lot more to get a lot less in return. This reflection is indicative of the necessity of a debate on health care in this country as opposed to the gridlock that we have received in the past few years. The New Right, despite the figures shown above, has been able to mask our serious health care issues. Reflecting on the comparative numbers is a good way to start realizing we have a problem.

History

Though this paper is not a statistical analysis, some background is necessary. I begin this background with the book *Health Care Reform and American Politics*. The section begins with the time period of the Affordable Care Act, the Obama Administration’s new attempt at health care reform. The book explains that major reforms only occur in this country when things line up just right, which they did in 2009 so that the Obama administration would be able to push health care reform through Congress. The authors mention the risks revolving around trying to get such landmark legislation through: they highlight how President Clinton attempted health care reform in 1993 and 1994, only to have it fail. The aftermath of that debacle, as the authors explain, “brought a conservative Republican takeover of Congress in November of 1994” (p. 17). Clearly there was risk for President Obama to undertake such a large project- however things seemed to line up just right with Democratic control of both chambers of Congress.

The authors then dive into a statistical analysis of health care in our country, first looking at the increase of citizens who are uninsured since 1980. Particularly striking was that they mention citizens in the bottom fifth quintile of wage earning have had an increase in lack of insurance from 18% to 37.4% in that time period. (p. 20). This is a major change- possibly indicating that health care costs have crowded many citizens out. It simply is not affordable for

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9 Jacobs & Skocpol *Health Care Reform and American Politics: What Everyone Needs To Know*
many Americans. The authors then compare the per capita GDP spending of the United States to the other top 30 industrialized nations. They use the year 2006 as their point of analysis, remarking that the U.S. spent 15.3% of its GDP on health care that year. Currently, spending is around 18%. The authors explain that Canada only spent 10% of its GDP on health care in 2006, and England only spent 8.4%. (p. 21). At the same time, these countries have found ways to insure all of their citizens as opposed to leaving about a sixth of their citizens without any insurance.

The authors acknowledge that the rebuttal to these sorts of statistics by proponents of private insurance will remark that “America has better care” or that ‘People in other countries spend time on waiting lists to get the care they need’. The authors deny this, however. They state “international measures of health care often show that American patients in general often do worse than people with comparable conditions in other, more frugal national health care systems.” (p. 22). They also indicate that we have “different health care outcomes divided by race and ethnicity” and we have the “28th highest infant mortality rate of any country in the world. More rebuttals have stated that anyone has access to health care because even those without insurance can go to an emergency room- but the problem is that consistent emergency room visits by people who do not have health insurance will clog emergency rooms up so people who have emergencies can’t use them. Nobody wins in this situation. So, it’s clear from these facts that the U.S. spends a lot of money on health care but doesn’t get a good return on the investment.

The genealogy of our health care debate in this country is discussed, and it is explained how in other countries such as Germany there have been health care systems since the 1800s. Due to this, there have been people pushing for a universal health care system in the U.S. for a
century. Almost all Democratic Party presidents since have attempted to introduce one, and the reform proponents ended up sinking a lot of effort into the Medicare and Medicaid acts in the 1960s. However, the government has allowed pharmaceutical and insurance companies to have their run of the country, allowing them to produce expensive drugs that will produce high profits. Since these companies benefit from the high costs of these drugs, they don’t want a universal health insurance policy- as the authors put it, they have more to gain from the low wage earners not having a health care program. Things are optimal for insurance companies without a program. (p. 28). In fact, even in the last 10 years, health insurance premiums have increased 131% and worker contribution to their plan has increased 128%. These numbers show no signs of slowing (p. 28) and at the current rate of growth, health care expenditures will eclipse all other spending entirely and force the country into a dire economic situation. Despite these bleak numbers, the New Right has been able to dictate the conversation and convince people that President Obama doesn’t have the solutions.

The progression following this background makes for an important starting point in the New Right discourse. I’d like to focus on the development of the Affordable Care Act here in America. According to the authors of Health Care Reform and American Politics, President Obama saw his election and the Democratic Party’s control of Congress as a mandate to do something about the health care problem that he touted during his campaign. While initially slow to spell out his plan (p. 33), Obama increasingly realized that people wanted real change in the realm of health care and used it at the end of his campaign as a major campaign issue. This wasn’t to go off without a hitch, however.

Following his election in 2008, President Obama found the American public was disinterested in the health care issue. The citizens were much more focused on the ailing
economy in the wake of the recession that began in the fall of 2008. The authors state “interest groups and commentators not so enthusiastic about comprehensive health care reform under Democratic auspices quickly proclaimed that Obama had too much on his plate and should delay health care reform.” (p. 41). There were other advocates of putting it off such as chief of staff, Rahm Emanuel, who suggest that health care reform was too big of a risk, since he had witnessed a similar push fail during the Clinton administration. Emanuel reportedly explained to the President that he “didn’t want to fail again.” (p. 43). However, Obama decided to pursue the issue as the centerpiece of his agenda. The Obama administration, in a 2009 outline, set down $630 billion USD as a “down payment” to pave the way for the comprehensive program (p. 46).

At first a promising notion, it became clear quickly to the Obama administration that the people didn’t like the idea of spending that kind of money when the economy was in such poor shape (p. 47). According to public opinion at the time Americans were far more interested in President Obama’s plans to stimulate the retracting economy. The authors remark that this was an interesting predicament in America as far as the attention of the public goes. They state that while “Most legislation is not closely followed by the public as it inches through Congress…continuous media brought the issue into greater focus…[and] many Americans did not like what they heard and saw.” (p. 50). Ill sentiment was brewing around the Obama Administration plan which eventually came to a head with the formation of the New Right discourse.

What really got the attention of the American public were the deals that occurred in the U.S. Senate to get votes for a health care reform bill following the House of Representative’s passage of the bill that would become the Affordable Care Act. One of these instances was the infamous “Cornhusker Kickback” which was a plan “devised to send extra Medicaid subsidies to
Nebraska in return for the vote of Senator Bill Nelson” (p. 51). These types of backroom deals are what make Americans believe that politics is shady- and plenty of them occurred to get the votes necessary to pass a health care bill. The authors remark that while the deed was done, it was to be wondered at what cost to the administration all of this transpired (p. 52). This behavior is useful for the New Right, which can point at it as the type of big government shady dealings that will make the citizenry weary of the Obama administration’s plans.

The authors then comment on who lead the charge to enact these measures. One of these measures was President Obama’s use of the “bully pulpit” to push measures through as the fresh, newly elected, inspiring figure. Speaker Pelosi was discussed as someone with an easy path because her “75 seat majority ensured she could pass bills with a majority while still losing a portion of her Democratic majority.” (p. 61). Harry Reid, the Senate Majority Leader, dealt with many more issues than Pelosi in the enacting of health care reform. Reid had a majority with 58 Democratic senators and 2 independents that caucused with Democrats, but some of these Senators had interests back home to protect. Public sentiment was against the cause, and this meant that things like the Cornhusker kickback would have to occur in order to pass a health care bill. The authors don’t exactly condemn backroom deals despite their knowledge that the American public doesn’t approve of this behavior on the part of politicians. They remark “There was no way to reform 1/6th of the American economy without engaging the major economic stakeholders” (p. 67) as well as working clandestinely to meet all the interests possible.

On top of all of this, bipartisanship wasn’t the intention of the members in Congress throughout this process. The authors also remarked that bipartisanship “represents an aspiration shared by many voters- and was espoused by President Obama himself in the 2008 election campaign, when he repeatedly promised to fix the broken system in Washington” (p. 83).
President Obama had run on a campaign of “hope” and “change” so the American people wanted to see a far more united government than the one that had precipitated during the Bush Administration. For all parties involved, watching the fight get dragged out was disheartening and caused a lot of anti-government sentiment- most of which I believe has haunted the President since.

The Media & The Message

At this point, the American people did not trust the Obama administration or their plans for health care because of the messy partisan fight and because of instances such as the “Cornhusker Kickback”. I believe that this dissent is a concept deeply embedded in the political landscape and philosophical groundings of our country. The concept of the “individual” is championed and the idea of a big, intrusive government is considered tyranny. This country was built in the wake of a tyrannical administration conducted by King George III of England; so to this day people are wary of the idea of a big government and more interested in individual rights. The New Right members of the media have capitalized on these notions and have spun the health care debate through language and rhetoric by using a series of “buzzwords”. These are simple terms that have a profound effect on the way that people think because they are normally based in strength or fear. They lead citizens to believe they are either better than the community or that they should be afraid of a government policy.

Rugged Individualism

The Heritage Foundation suggests that the United States is weakening because “Americans’ growing dependency on government is both a symptom and a cause of the movement away from constitutional government and toward an ever-greater role for government
in the daily lives of citizens.”\textsuperscript{10} This is a pseudo-prophetic notion that feeds into the idea that a government healthcare program would be intrusive and limiting on individual rights. The Heritage Foundation cites actors like John Wayne for America’s past prominence in the area of rugged individualism. They quote Wayne as saying “Out here a man settles his own problems” in the film \textit{The Man Who Shot Liberty Vance} and argue that this type of attitude was once indicative of America as a whole and contributed to community building and our thriving economic situation until recently. They call this a ‘national character’ that the United States possessed and is slipping because of things like the Affordable Care Act. I believe that these ideas, and the perpetuation of them, are the reasons that Americans are resistant to the idea of health care.

Following the Supreme Court’s upholding of the Affordable Care Act, Uwe Reinhardt, an Economics professor at Princeton University penned an article discussing the philosophic reasons behind opposition to the ACA. He looks at the ACA through a normative lens, looking at people’s motivations to be opposed to it. A big controversy over the ACA is the fact that people have the opportunity to neglect the program and pay a penalty in lieu of purchasing insurance, which he outlines stating “healthy, higher-income people without the benefit of subsidies are likely to choose just to pay the penalty, knowing that they can avail themselves of community-rated coverage in case of serious illness.”\textsuperscript{11} This does leave people with an option or open out to not participate in the ACA. Instead, they can just pay a low penalty and not have to take care of anyone else or play into any idea of solidarity. People can maintain their individuality for a fairly low price. The fact that people don’t want to participate in contributing to the overall care of others leads to a moral dilemma: people are interested only in their well-

\textsuperscript{10} Heritage Foundation: Index of Dependence on Government (http://www.myheritage.org/tag/index-of-dependence-on-government/)
\textsuperscript{11} Reinhardt, Uwe “Health Care: Solidarity v. Rugged Individualism”
being and not the well-being of society. It seems that many Americans would prefer to take the route of individualism to the concepts of solidarity or collectivity.

From the same vein as John Wayne’s quote, America is premised on thinkers like Ralph Waldo Emerson, who preached “self-reliance”. In his piece Self-Reliance, Emerson made statements such as “the great man is he who in the midst of the crowd keeps with perfect sweetness the independence of solitude”.\(^\text{12}\) Statements like these, widely taught and embraced by so many in our culture would make one wonder why to support the society over oneself. Emerson also stated “nothing is at last sacred but the integrity of your own mind”. While these statements are powerful ideas about individualism, I believe they’ve caused Americans to be uninterested and unwilling to look at other concepts of communal society building. National level solidarity is dead. Even New Right statements on how separate states should be able to administer laws differently prevent us from having a national theme or character. It harms the possibility of national unity. Outside of charity, people don’t want to help, and they certainly don’t believe things like the ACA can help because it’s a government program that will only lead to a more bloated, higher-spending system. When it comes to health care, the typical American citizen is left to fend for himself and his commentary falls on deaf ears. There are individual notions at play and generally people don’t think a problem is an issue unless it affects them directly. This supports Reinhardt’s earlier statements that for some paying the penalty makes more sense- they just simply don’t care about contributing to a health care system that might not benefit them at all at the day’s end. Some people would rather risk having no health care than support a system that does not benefit them. Part of refusing to purchase health insurance is also akin to taking the stand as a member of the New Right. This stand is equivalent opposition to a

\(^{12}\) Emerson, Ralph Waldo. Self Reliance (http://www.emersoncentral.com/selfreliance.htm)
program when the media and the politicians have told the people not to. As Foucault had stated, part of a usurpation of power is the action of inducing pleasure. In taking a stand, people find pleasure as a member of the opposition. In a country where big government is believed to be a natural evil, becoming a part of this opposition is a pleasurable act, united with one side in argument. The New Right had created a power dynamic in their favor by inducing this pleasure. This is a profit-based society where the reward of not having health care (i.e. not paying an amount of money for something that might not be a needed) outweighs the risk of someone needing health care for some people.

The media has generated a lot of discussion of the state of rugged individualism because of the Affordable Care Act. Some of the major “talking heads” like Rush Limbaugh have distorted or put their own spin on the concept of rugged individualism. A few months after Obama was elected, Limbaugh wrote in editorial and hosted a show he titled “In Defense of Individualism”. In it he slammed Obama and the liberals in America for insinuating that society should come before the individual. He stated, “The country was built on rugged individualism. Rugged individualism is portrayed, unfortunately, as selfishness. But it is not selfishness. Rugged individualism is self-interest, and self-interest is good.” With these comments, Limbaugh set fire under what would become the New Right & Tea Party rise, when conservatism looked dead in the water just a few months earlier in the wake of Obama’s landslide 2008 election. This idea has become the cornerstone of the New Right opinion on individualism. It is okay to ignore your neighbor and only take care of yourself, as there is a benefit. “The good life” would mean that one is looking out for his or herself rather than those in the community.

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Limbaugh’s use of “rugged individualism” is a classic play on great American philosophers such as Ralph Waldo Emerson. However, I perceive it to be a distortion of these thinkers in an attempt to alienate Americans from the Affordable Care Act. Keeping in mind the statements made by Emerson, Americans are lead to believe that individualism has an implication: ignore the needs of others and do only for yourself. Though a transcendentalist who believed in the inherent good of people and that together self-reliant individuals create a positive community, Emerson’s work is distorted by Limbaugh who uses it for another purpose: to turn individuals away from other individuals. America’s new weakness, according to Limbaugh, lies in its interest in being a socialist, European-style government. What is perceived as betrayal of individual rights by the Obama administration was caused by Limbaugh’s words. Limbaugh’s average weekly listenership is in excess of 14 million Americans\textsuperscript{14} so there is a wide net cast with these statements. When the nation signs on with Limbaugh’s ideas, naturally they find President Obama’s ideas illogical.

Death Panels

A powerhouse of the New Right, Sarah Palin, relied on misinformation to get her point across in the fight over the ACA. She claimed that the plan would include death panels, where government officials would decide if a person was worth the cost of money that would be spent to heal them, basically breaking down lives to a situation of costs and benefits. Betsey McCaughey, a woman known for her history in creating false scenarios, asserted on Fred Thompson’s radio show in July of 2009 that “death panels” would be used to determine who would live and who wouldn’t. She stated

And one of the most shocking things I found in this bill, and there were many, is on Page 425, where the Congress would make it mandatory— absolutely require—that every five

\textsuperscript{14} Chafets, Zef. “Late Period Limbaugh” \textit{New York Times}
years, people in Medicare have a required counseling session that will tell them how to end their life sooner, how to decline nutrition, how to decline being hydrated, how to go in to hospice care. And by the way, the bill expressly says that if you get sick somewhere in that five-year period—if you get a cancer diagnosis, for example—you have to go through that session again. All to do what’s in society’s best interest or your family’s best interest and cut your life short. These are such sacred issues of life and death. Government should have nothing to do with this.15

While this was absolutely not the case, these women were referring to Section 1233 of the bill where it stated that doctors would counsel patients on Medicare about living wills and end-of-life care. It was designed to prepare patients for the future, not decide when they would die as the New Right had put it. This myth reached its peak because of Sarah Palin, who stated

> The America I know and love is not one in which my parents or my baby with down syndrome will have to stand in front of Obama’s death panel so his bureaucrats can decide, based on a subjective judgment whether they are worthy of health care. Such a system is downright evil. (p. 8).16

This is an example of Fairclough’s media hidden-discourse, where nobody is able to offer up a counter to the argument made by Palin. Since the message is going to viewers who aren’t paying much attention, her statements qualify as truth. She benefits from being the producer of media and has her message heard since it is the louder, more frightening message. As Palin could control the discourse like Fairclough mentioned, she holds the ability to create the views for her audience and get the people to believe these things. Though this was all later determined to be a lie, the lasting effect was that it again frightened the citizenry with the threat of a big, bureaucratic government that took away liberty and individual choice, replacing it with a subjective system that went against the grain of American exceptionalism.

The Romney Case

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15 Nyhan, Brendan. “Why The Death Panel Myth Wouldn’t Die” p. 6-7
16 See note 12.
It wasn’t all about misinformation, of course. Sometimes politicians would act in ways during the health care debate or say things that would better posture them in the debate. Mitt Romney is a prime example of a message that was tailored to match the views of the New Right. Romney, whose plan for insurance in Massachusetts was the model for the Affordable Care Act, had once been a proponent of the individual mandate that is the centerpiece of the legislation. The “individual mandate” piece is the requirement by the government for all citizens to individually purchase an insurance plan. It was Romney’s idea and the main part of his legislation in Massachusetts. After the ACA passed, however, Romney positioned himself for a run at the presidency by condemning something that he had once believed in through a sharp use of language. He referred to the act as “an unconscionable abuse of power”\(^\text{17}\) and unable to distance himself fully from the Massachusetts plan, touted how his bill had bipartisan support while the Affordable Care Act did not. This was the only solution that he could come up with to dispel the Obama plan. It is clearly misinformation on the part of Romney because if it was an abuse of power on the national level it could also be one on the state level. Any government, a state included, shouldn’t be allowed to require an individual to purchase something by his logic. The word “abuse” heightens fervor against the ACA as the New Right had already established what a power-hungry, big-government liberal President Obama is. Romney’s insinuation is that not only is Obama a big government proponent, but also is abusing his power by passing the act. His only excuse as to why his plan was different was that it garnered bipartisan support in the Massachusetts state house, but this is actually irrelevant, as the New Right had already created a strong division of political parties in the country. Their fringe political discourse serves to drive Americans farther apart into more radical beliefs. Furthermore, his explanation that he had “bipartisan support” is yet another use of language intended to vault his campaign. It’s a term

that makes him look like a leader of all, not just some, and someone who has the ability to unite 100% of the country. Behind closed doors, he readily admitted that he wasn’t concerned about 47% of the citizenry that would automatically vote for a Democrat, though. The use of the message to the general public is a power-usurping move as Foucault defined it.

Tax

In the debate over the Affordable Care Act, much was said about its status as a “tax” as opposed to a penalty if one did not get health care. The way the plan was set up by the Obama Administration is that if one has the opportunity to and does not purchase health care, they’ll be penalized a certain amount that increases over a period of years. This was a plan that gives incentive for people to get health care coverage- if one doesn’t they’ll have to pay. The New Right made a mountain out of this penalty, referring to it as a tax. The right wing of the U.S. has been vehemently opposed to taxes for quite a while but especially since the mid-90s when Speaker Gingrich signed the “Contract with America”. In a time where the economy struggles like today, the last thing the citizenry wants to hear is about a new tax that they will have to pay. The parties assume that people vote with their pocket books and in times of dire financial situations, they will vote against the incumbent president. The New Right decided to shape the penalty as a tax in their discourse in order to turn the citizenry against it.

Of course the ACA had to be settled in front of the Supreme Court in 2012 in order to give the American people an answer on it’s constitutionality with the election coming that fall. The ability of the government to force an individual to buy something was brought into question. The New Right argued that nowhere in the Constitution does the government reserve the right to put something on the market and force people to purchase it. An answer to the question was needed, and the Supreme Court was the last entity that could rule on it to give us an answer. The
Court generally stays above the fray of politics, but at this time it had to get directly involved in the political debate.

The result of the Court case was a shock to some- but I believe that it makes perfect sense. Chief Justice John Roberts voted with the liberal block of the court to hand down a 5-4 decision upholding the ACA. Though this seems like a risky move for a conservative, it gave Roberts a lot of opportunity to alter the discourse on the ACA and offer it up to the New Right to shape. Roberts’ ruling with the liberal block allowed him to assign the majority opinion in the case, because of his status as the Chief Justice. He assigned the opinion to himself, and was able to define the law in any way that he wanted, so he did so in conservative terms. In his argument, he stated that the penalty was the equivalence of a tax, giving the New Right the final say on defining the act.

What this meant for the 2012 election is that the Right could preach to the American people that Obama had taxed them yet again in an era where new taxes are considered political suicide. This was in my opinion a calculated move by Roberts to send the discourse back to conservative control despite the ruling. The Heritage Foundation has since run with the issue, calling the “tax” something that will “kill economic growth and jobs.” Their statement on taxes reads “All tax increases have negative economic effects because higher taxes take resources from the productive hands of the private sector and transfer them to the wasteful hands of politicians. Higher taxes also lessen the incentives for individuals and businesses to engage in activities and behaviors that expand the economy and create jobs.”¹⁸ These statements are exemplary of what Foucault had said- that an argument produces power. With a legal background to the Affordable Care Act decided, citizens believed they had real knowledge outside of rhetoric that fueled their opposition. The New Right was able to show how President Obama was hurting them by adding

an extra tax to their daily lives. The result is that the New Right had the opportunity to control the debate on health care going into the 2012 election. Despite losing, it was and continues to be a major talking point for the Right even in the wake of some perceived Affordable Care Act success. I believe their plan is to ride this talking point into the 2014-midterm elections and try to steal seats from the liberal caucus that supported the ACA.

In conclusion, the New Right has used rhetoric and powerful language in order to control the discourse on health care and oppose the Obama administration. In an unprecedented assault of the airwaves, the New Right has a demographic of Americans more afraid of big government and bureaucracy than ever before. As the debate over the Affordable Care Act winds down, I anticipate that the New Right will not go away but will instead continue with this form of rhetoric in future battles.
Works Cited


