

Economic Circumstances and Support for Universal Health Care

Daniel Cotter
Bemidji State University

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Dr. Patrick Donnay, Advisor

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Abstract

There have been many differing opinions over the new health care bill passed in 2010. My research is aimed at finding what factors play a role in forming an opinion on the new health care bill. Specifically looking at the economic and demographic circumstances of citizens of the United States and how it has affected their opinions on the health care bill. I use data gathered from the Pew Research Center and ran crosstabs on various different variables including opinions on the current economy, demographic characteristics, as well as opinions on the current health care plan. I anticipate finding that those experiencing difficult economic circumstances; will have less favoritism for the universal health care plan. Also, I anticipate finding that minority groups favor universal health care more than the majority does.

Introduction

Over the past couple years, health care has been a main concern for the government and citizens of the United States. Research has shown that many Americans feel that the current health care system is flawed and that changes need to be made. The Obama led Democrats recently passed a major health care reform package. This paper is aimed at researching factors that have contributed to public opinion on health care. Some research suggests that race is a primary factor that contributes to one's opinions on health care. Other research suggests that age may be the primary factor that determines a person's view on health care. During my research I would also like to determine how the economy can affect opinions and views on the new health care plan. Universal health care will cause a huge financial burden on our government and it will be interesting to see how opinions have change since our economy has gone through a recession and has not fully recovered. Unemployment rate has hit a new high, the housing market has crashed, many people are having personal

financial difficulties paying off their bills. It will be interesting to find out if people's opinions have changed since these financially troubling times began.

Literature Review

Public Opinion and Policy

Most political scientists believe that public opinion has an effect on policymaking in the United States (Burstein and Linton 2002; Jacoby 2006). However, some researchers like Benjamin Page (2002) feel that it is not playing a significant role. Benjamin Page who has long argued that the public's opinion matters, now claims that studies over exaggerate the influence public opinion has on policy. "If we accept a populistic democratic theory that calls for close adherence of policy to the preferences of ordinary citizens, then the U.S. political system has a long way to go before it becomes fully democratic" (Page 2002: 342). However, findings done by Stimson shows that "there exists about a one-to-one translation of preferences to policy" (1995: 155). According to Stimson's findings the U.S. government does an excellent job of turning public opinion into policy. Page challenges Stimson stating that, "our studies find opinion strongly affecting policy because we have public opinion data mostly for issues on which government responsiveness is especially likely on issues important to the public" (Page 2002: 345). This is implying that the conclusions that researchers have come up with are based on biased sample of issues. Since health care is an issue important to the public, according to Page's beliefs, public opinion will have an effect on policymaking.

Race

Since a lot of new research agrees that public opinion has an effect on policymaking we must find out what elements play a role in shaping public opinion. Age, gender, race, media, social status, political views, life experiences, and knowledge of the issue are main factors that contribute to people's opinions. Mike Tesler (2009) concluded that race in the recent health care reform is the primary determinant of support or non support on this issue. Tesler believes that the increased black-white racial divide in approval of Obama's presidency will also reproduce itself in support for his health care reform proposals, According to this theory black approval ratings for the health care reform will be significantly higher than white approval ratings simply because of race. However, a study done by Betencourt (2003) sheds some light as to why minorities may favor the health care reform over the majority. Betencourt's study states that "members of minority communities tend to be more socio-economically disadvantaged, to have lower levels of education, to work in jobs with higher rates of occupational hazards, including air pollution, all of which are associated with worse possible health outcomes" (Betencourt 2003: 55). A study done by the Kaiser Family Foundation (2008) found that Latino's and African Americans are significantly less likely to have access to health insurance than other racial groups. Both of these studies indicate that minorities are the ones most likely to favor the new health care reform because they are the ones that most likely need health insurance and it will benefit them greatly.

There are however, conflicting arguments that race is not the most important factor that determines views on health care. A study done by Andrew Geldman, Daniel Lee, and Yair Ghitza (2010) found that support for health care reform remained steady for all ages up to the age of 60 where there is a sharp decline in support for health care reform. So, according to this

study people over the age of 60 are going to be more likely to oppose health care reform regardless of race.

Health Insurance

Other research has shown general characteristics of the uninsured person. Research done by Rick Mayes (2004) shows that the uninsured person tends to be lower educated, have somewhat lower income, and also are the younger generation. According to this study it is plausible that these lower educated, poor, younger people will be the ones most likely to favor the new health care reform. In earlier work Dr. Popkin agreed with this assessment on incomes by stating “the influence of economic conditions on electoral outcomes assumed an explanatory mechanism in which individuals’ electoral decisions are based upon the tangible economic situations they face in their daily lives” (Popkin et al. 1976). Research done by Jennifer Benz (2008) agrees with Popkin on this point finding that “individuals currently lacking health insurance, those with a tangible interest in the policy, were significantly more likely to support the policy. The effect persisted even when symbolic beliefs, such as party affiliation and ideology, and sociotropic perceptions of the uninsured problem were controlled for in the model” (Benz 2008 pg. 6). Accordingly people will only support or not support policies based on what they feel will benefit or not benefit their situation. Ideology, symbolic beliefs etc., are not the main factors that contribute to people’s political opinion it is however, how a policy will directly affect a person that decides their support or non support. This may explain why the New England Journal of Medicine (2009) reported that many Americans believe they simply cannot afford to cover the uninsured, since doing so would require taxes to be raised beyond

the level the public can sustain. Since more people are beginning to feel that they are unable to support the uninsured during this tough economic time, support for the health care bill has fallen.

Education and Knowledge

Another factor that may affect someone's view on health care is also education and knowledge one has on the new health care reform. Althaus (2003) argues that knowledge does matter, and how it is distributed in society can cause collective preferences to reflect disproportionately the opinions of some groups more than other groups. According to Althaus, interest groups such as the AARP, affect the public's view on the health care plan because they spend millions of dollars in advertisements to lobby people's support for the new health care plan. Personal belief may also play as a significant factor in developing views on government services. Green (2009) believes that the psychological belief in a just world may be an important determinant of public opinion regarding health care policies. He concluded that people believing in a just world are more likely to favor government spending on health care than people not believing in a just world. According to this study a person's view on what a just world is plays a factor in whether they support or do not support the new health care plan.

Partisanship

Partisanship may also have an effect on the public's opinion on the health care plan. Daniel Reagan (2009) shows that partisanship is a significant factor that contributes to people's views specifically on political issues. Reagan's study concluded that Democrats are more likely to favor government expanding its role in health care whereas Republicans are more likely to

oppose it. This study shows that public opinion on the government's role in health care may have a direct relationship with what political party they support. According to Stimson (2003) throughout history there has been strong support for better government efforts and involvement towards health care. However, Stimson (1999) believes that this support comes from the public only focusing on the benefits they will receive instead of the costs or tradeoffs that will occur. Once people learn about the individual level costs and tradeoffs, support for government run health care often declines. If Stimson's theory is correct then people who are informed on policies and affects of the new health care system will be less supportive. However, this may or may not be true depending on which side of the benefit equation they are on.

According to Althaus "the demographic characteristics of well informed people can cause collective preferences to reflect disproportionately the opinions of some groups more than others (1998)". Many studies have shown that the well informed person who participates in politics tend to be older, white, and male (Althaus 1998; Brady, Verba, and Scholzman 1995). By only having this specific group of people participating in giving their opinion on political issues we are only receiving their views and not a collective public view on health care with all groups participating. Because the distribution of political knowledge is so uneven, the public's opinion appears to be more conservative on some issues and more progressive on others (Althaus 1998).

Is the average American well enough informed on political issues specifically when it comes to the new health care plan? Many surveys have been conducted that show the lack of

political knowledge by the public. A study done by the American National Election Studies to measure the public's knowledge on politics found that the ability of respondents to answer these questions correctly were scarce (Althaus 2003; Deli Carpini and Keeter 1996). However, Althaus states that "people who are ill informed can nonetheless form opinions consistent with their political dispositions" (Althaus 1998, 546). The public is able to do this by taking cues from elites, "...about which policies they should prefer and by harnessing a variety of heuristic strategies that deduce their political preference; thus avoiding the need to infer preferences from factual bit of knowledge stored in long-term memory" (Althaus 1998, 546). Lupia agrees with Althaus on this point; the lack of knowledge on an issue does not have an effect on public opinion surveys because the less-informed voters emulate the behavior of the well-informed voter and vote as if they were well-informed (1994). From this, one is able to conclude that the public not being informed on health care may not be as important as previously thought. According to this researcher the public is still able to make intelligent and informed decisions based on political elite views. However, research done by Page and Shapiro found that it is very difficult for elites to manipulate public opinion (Page and Shapiro 1992). If this is true, then this contradicts Althaus and elites do not affect the ill informed public opinion on health care and the public will continue with their views until they receive more knowledge on the issue.

Public Opinion Information

Other research conducted has suggested that people come to a conclusion on an issue based off of information that they were exposed to at that time (Redlawsk and Humphrey 2002; Lau and Redlawsk 1997). However, they quickly forget the key facts on the issue, so it

appears that they have an ill informed view, when at the time they came to their conclusion they had an informed view on the issue. This could be a reason why it seems as though the public lacks knowledge on the health care plan. Perhaps when people decided their view on the health care plan they were informed individuals at the time, but later when surveyed on their knowledge of the health care plan they forgot the information that they once based their opinion on. To investigate this point Highton and Claassen (2006) conducted a study to find out if information effects were reduced during health care policy debates. They analyzed public opinion on health care before, during, and after the policy debates of the 1990's and found that "information effects in public opinion were exacerbated during the time of greatest public discourse" (Highton and Claassen 2006). Their findings show that "policy debate does not appear to compensate for political ignorance and enable the uninformed to behave "as if" they were better informed" (Highton and Claassen 2006). According to these findings the public is still ill informed on health care even during the greatest height of health care talks and it is very difficult for the public to have an intelligent informed view on the health care plan.

In a poll taken by FOX news in 2010, out of 900 people polled only 39% favor the new health care plan and 53% oppose it. Respondents were also asked how much they feel they know about the changes that are being made to our health care system. The results were surprising with 70% saying some or great deal and only 29% responding not much or very little. However, this data may not be valid because it is hard for respondents to rate their knowledge on the health care plan. If this data is legitimate and these people actually are informed on the health care plan then the informed view on health care will be opposed to the changes that have been made.

In 2006, Massachusetts became the first state to enact a law mandating universal health care coverage. Surveys were given to physicians in Massachusetts to see how they responded to their state's new health care system. Physicians from Massachusetts are excellent respondents for this survey because they have a firsthand look at the effects universal health care coverage. The survey, conducted by the Robert Wood Johnson Foundation and Blue Cross Blue Shield, show that 70% of physicians support Massachusetts new health care policies and only 13% oppose it. This research indicates that people who are informed on Massachusetts new health care plan are in support of it which contradicts Stimson's theory that the informed view will be opposed to the new system. However, physicians who are in favor of the new health care reform may get new patients and more revenue, which may affect their views because of the economic increase to their business. According to the New England Journal of Medicine Massachusetts health care system may have played a role in developing policies for the national health care plan. So, this could be a good way to find out how the rest of the physicians will respond to universal health care. This survey does not express the views of all informed people in the United States, it only takes the views of Massachusetts physicians.

Other Questions

There are many questions that need to be answered from the research that I have uncovered. Are different ethnic groups more likely to support the health care plan? I was unable to find a legitimate source on this question. I was only able to uncover that older white males were more likely to be informed and participate in politics. I would also like to look more in depth at the health of the economy as playing a major role in determining views on health

care. If the economy is going good does that change view son health care? Or if the economy is doing poorly (which it is currently) does that change views on health care? Does sex play a role in one's views on how the health care system should be operated? I would also like to determine views on the new health care plan based on knowledge of the new health care plan. Do people who are informed on the new health care plan support it? Do people who are uninformed on the new health care plan support it? Would opinions change if someone who is uninformed becomes informed? Basically I would like to find out what are the primary factors that determine ones opinion on the new health care reform.

Methods and Analysis

Data for this analysis came from the Pew Research Center. For this survey there were a total of 1500 respondents. Out of those 1500 respondents 727 are males and 773 are female. It is important to know the number of females and males that participated in this survey because sex will be a control variable. Race is also a key variable for my data and it is important to know the quantity of each race for this data. Out of the 1500 respondents 1106 were non white Hispanic, 149 black non Hispanic, 120 Hispanic, 93 other Hispanic, and 32 did not know or refused to answer that part of the survey. The 32 people that did not respond to the race question will not be a factor in this data analysis because it was removed to make the data clear. I made four crosstabs and also one clustered bar chart from this data. Out of the four crosstabs two of them have the same independent and dependent variables the only difference is the control variable of sex. The other two crosstabs are organized in the same way with the dependent and independent variable staying the same and having the control variable sex. In the first table I wanted to see how a person's financial situation affects their opinion on the

new health care plan. The results showed that it didn't matter how people viewed their own personal financial situation, there was general lack of support for the new health care plan. For example when people viewed their own personal financial situation as good only 43.1% favored the new health care plan and when people viewed their own personal financial situation as poor only 45.3% approved of the new health care plan. The Chi Square is 3.566 which means that the data is not statistically significant at the .05 level. The Lambda value is .003 and the closer to 1 it gets the stronger the relationship. The P score is .312 which is also not statistically significant.

(See table 1)

Table two presents the same independent and dependent variables as the first table, however sex is used as the control variable. The results show that the majority of males (59.4%) and the majority of females (57.5%) oppose the health care bill right now. There is not a huge difference between how males and females view the new health care plan when relating to their own personal financial situation. There is just a steady lack of support for the new health care plan. The Chi square for males is .592 and for females it is .374 which is not statistically significant at the .05 level. The results also show that males and females both do not have a significant relationship with their views on health care, related to their personal financial situation. The p score was not able to be computed because the chi square was so low.

(See table 2)

Table 3 represents people's view on the handling of the health care system by Barack Obama as the dependent variable and how people view our nation's economy as the

independent variable. Sex was not used as a control variable in this data set. The table shows that a greater percent of people who believe our nation's economy is poor will disapprove of the way Obama is handling our health care system. For example, out of the 60.8% of people who believe Barack Obama is not doing a good job with the health care system, 71.1% of those people also believe our nation's economy is doing poorly. The Chi square shows that this relationship is not significant because it is higher than .05 at 83.678. The lambda value for this data is .072. The lambda value is important because the closer to one the stronger the lambda relationship is, the farther away from one the weaker the relationship gets. The lambda p score indicates that this relationship is a significant one because its value is .000 and the value needs to be less than .05 to be considered a significant relationship.

(See table 3)

Table 4 represents people's view on the new health care plan in relation to how they view the United States economy and using sex as the control variable. The results showed that both men and women who viewed the economy as excellent or good tended to favor the new health care plan more. For example out of the men and women who responded that the United States economy is excellent 80% of males and 66.7% of females approve of the way Barack Obama is handling health care right now. However, when men and women responded that the economy is only fair or poor there is a greater percentage of people who oppose universal health care. For example out of the men and women who responded that the United States economy is in poor shape 74.7% of males and 67.7% of females disapprove of the way Barack Obama is handling the health care system right now. The male Chi square is 47.428 and the

female is 39.053 which is not statistically significant at the .05 level. The male lambda value is .091 and the female lambda value is .057, so it is determined that males have a stronger relationship in this data set than females do because male lambda values are closer to one. The male and female p scores are both the same at .000 and that is statistically significant at the .05 level.

(See table 4)

For my final data analysis I used a clustered bar graph to show the relationship of race, health care insurance status, and the percentage of people that generally favor the new health care bill being discussed in Congress. The graph clearly shows that black non Hispanic and Hispanic people tend to favor the new health care system more than white non Hispanic and other non Hispanic people. Close to 80 percent of black non Hispanic people covered by health insurance favor the new health care plan and around 75 percent of black non Hispanic people not covered by health insurance favor the new health care plan. When compared to how white non Hispanic's with or without health insurance feel about the new health care plan there is a huge gap of support for the new health care plan. Only around 40 percent of white non Hispanic people without health insurance favor the new health care plan and around 35 percent of white non Hispanic people with health insurance favor the new health care plan. This graph clearly shows that race plays a pivotal role in determining one's opinion on the health care plan.

(See figure 5)

Table 1 Support for Health Care Reform by Shape of Personal Finances

			Personal Finances				Total
			Excellent shape	Good shape	Only fair shape	Poor shape	
Opinion on Health Care	Generally favor	Count	37 37.8%	201 43.1%	197 39.2%	102 45.3%	537 41.6%
	Generally oppose	Count	61 62.2%	265 56.9%	306 60.8%	123 54.7%	755 58.4%
Total		Count	98 100.0%	466 100.0%	503 100.0%	225 100.0%	1292 100.0%

Chi Square = 3.566, $p < .05$

Lambda Value = .003

P Score = .312, $p < .05$

Table 2 Support for Health Care Reform by Shape of Personal Finances and Sex

SEX.				Personal Finances				Total
				Excellent shape	Good shape	Only fair shape	Poor shape	
Male	Opinion on Health Care	Generally favor	Count	19 35.8%	86 40.0%	104 39.8%	51 45.9%	260 40.6%
		Generally oppose	Count	34 64.2%	129 60.0%	157 60.2%	60 54.1%	380 59.4%
	Total		Count	53 100.0%	215 100.0%	261 100.0%	111 100.0%	640 100.0%
Female	Opinion on Health Care	Generally favor	Count	18 40.0%	115 45.8%	93 38.4%	51 44.7%	277 42.5%
		Generally oppose	Count	27 60.0%	136 54.2%	149 61.6%	63 55.3%	375 57.5%
	Total		Count	45 100.0%	251 100.0%	242 100.0%	114 100.0%	652 100.0%

Male Chi Square = .592, p < .05

Female Chi Square = .374, p < .05

Male t score = could not compute using lambda

Female t score = could not compute using lambda

Male p score = could not compute using lambda

Female p score = could not compute using lambda

Table 3

Approval of Health Care Reform by View of US Economy

			How would you rate the United States economy				Total
			Excellent	Good	Only fair	Poor	
Approve or disapprove Barack Obama's handling of Health Care	Approve	Count	8 72.7%	55 67.9%	262 48.1%	212 28.9%	537 39.2%
	Disapprove	Count	3 27.3%	26 32.1%	283 51.9%	521 71.1%	833 60.8%
Total		Count	11 100.0%	81 100.0%	545 100.0%	733 100.0%	1370 100.0%

Chi Square = 83.678, $p < .05$

Lambda Value = .072

P Score = .000, $P < .05$

Table 4 Approval of Health Care Reform by View of US Economy and Sex

Sex:				How would you rate the United States economy				Total
				Excellent	Good	Only fair	Poor	
Male	Approve or disapprove Barack Obama's handling of health care	Approve	Count	4	29	126	89	248
				80.0%	63.0%	45.8%	25.3%	36.6%
	Disapprove	Count	1	17	149	263	430	
				20.0%	37.0%	54.2%	74.7%	63.4%
	Total		Count	5	46	275	352	678
				100.0%	100.0%	100.0%	100.0%	100.0%
Female	Approve or disapprove Barack Obama's handling of health care	Approve	Count	4	26	136	123	289
				66.7%	74.3%	50.4%	32.3%	41.8%
	Disapprove	Count	2	9	134	258	403	
				33.3%	25.7%	49.6%	67.7%	58.2%
	Total		Count	6	35	270	381	692
				100.0%	100.0%	100.0%	100.0%	100.0%

Male Chi Square = 47.428, $p < .05$

Female Chi Square = 39.053, $p < .05$

Male Lambda Value = .091

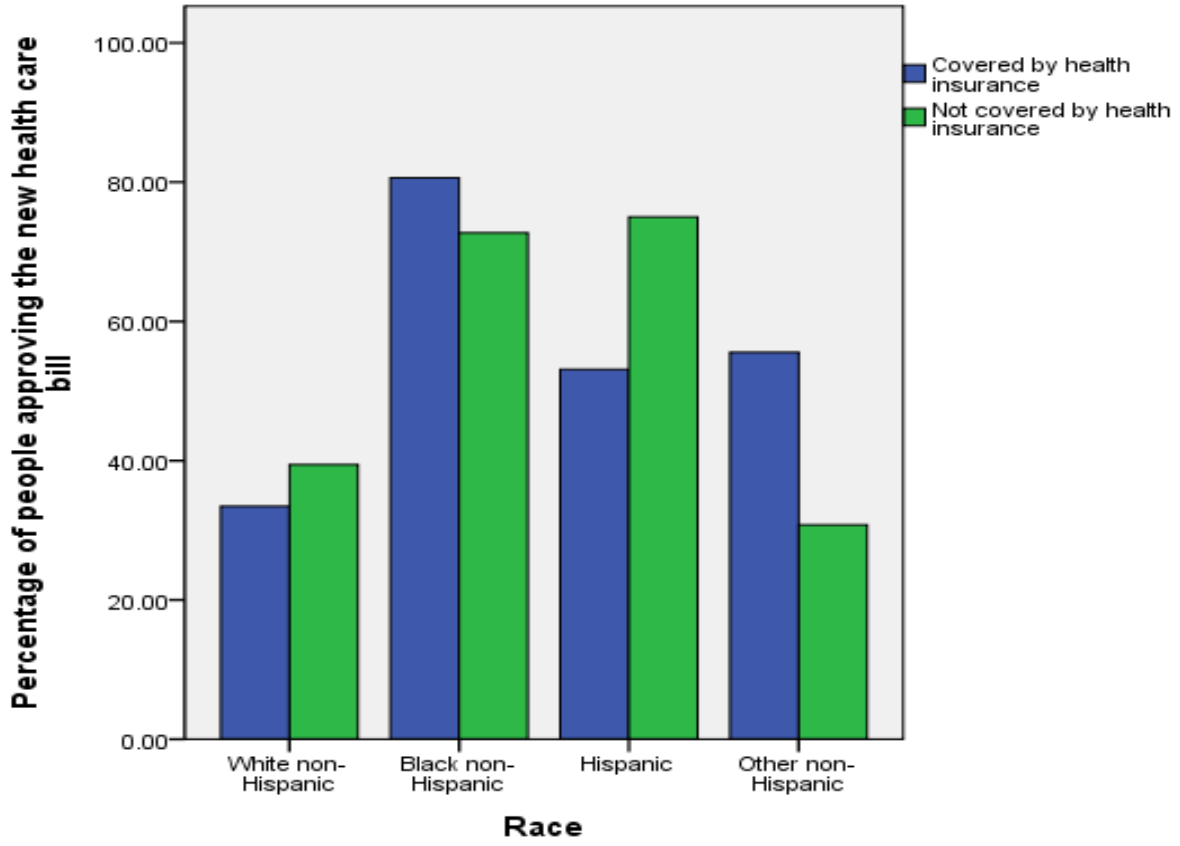
Female Lambda Value = .057

Male P Score = .000, $p < .05$

Female P Score = .000, $p < .05$

Figure 5

Bar Chart of Approval for Approval of Health Care Bill by Race and Insurance Coverage



Conclusion

In conclusion I have determined that there are many factors that play a role in how a person determines their views on the new health care plan. The data has shown that race is probably the most significant and crucial factor that helps determine opinion on the new health care plan. There is overwhelming support for the new health care plan from the black non Hispanic population as well as the Hispanic population. The data also sheds some light on how sex can be a factor that determines opinions on health care. The data shows that the majority of men, no matter how they rate their personal finances, are opposed to the new health care plan. Likewise the majority of women no matter how they rate their personal finances, are opposed to the new health care plan, however women's percentages are not as skewed as men's percentages. In conclusion the data has shown that people's views on the United States economy has a greater effect on ones opinion on the new health care plan then their views about their own personal financial situation.

There are several ways that I wish I could have extended my study a little bit farther. For example, I wanted to find some data that would shed some light on the age factor. Do older people tend to favor the current health care system over the new health care plan? Does age play a role at all? It would have also been nice to examine people's opinions on universal health care before the recession hit the United States. This would have been a great way to determine how public opinion is affected by the United States economy. Unfortunately the only data sets that were available were after the recession. Also, it would have been nice to see how an uninformed view on the new health care plan would change if the person became informed on

the subject. However, the data once again was did not allow for these calculations to take place.

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