

UC Office of the President

Student Policy Research Papers

Title

Effect of Affective Polarization on Public Opinion on Medi-Cal Expansion to Undocumented Immigrants

Permalink

<https://escholarship.org/uc/item/95f6n5gp>

Author

Homan, Ryan

Publication Date

2025-10-01

Ryan Homan

POL195 001

Effect of Affective Polarization on Public Opinion on Medi-Cal Expansion to Undocumented Immigrants

Introduction:

Due to the Trump administration's recent ongoing immigration crackdowns and wide-ranging tariffs, the growing sentiment to repeal the recent 2024 expansion of Medi-Cal to all income-eligible adults, regardless of immigration status, is coming into fruition starting on January 1, 2026. The recent action to halt this expansion on healthcare to undocumented adults completely overlooks their massive importance to the California economy. As a result, I decided to research broadly, how has affective polarization shaped public support for the expansion of healthcare programs such as Medi-Cal in California? Specifically, how has affective polarization rates affected public opinion for the expansion of Medi-Cal to undocumented immigrants since 2012 in California? To answer this question, I examine the affective polarization rates, measured using a feeling thermometer, from 2012 to 2025 with California public opinion on whether they favor or oppose the state creating their own policy to protect the legal rights of undocumented immigrants within the same time period. Through my research, my findings suggest that affective polarization may have an affect on public opinion on the topic of expansion among Democrats and Republicans. I conclude within my discussion that the increased polarization rates could be affecting public opinion because of a possible increase in issue partisanship with the influence of partisan elites.

Significance Section:

Affective polarization can be defined as “...how strongly the party identifiers in the public prefer their own party to its opponent(s)” which is based on their feelings towards the different parties (Gidron, 2020). While affective polarization may seem one dimensional, there are so many factors that can contribute to varying rates of polarization which include, but is not limited to, disputes by elites about cultural issues and economic conditions. It is important to understand and analyze affective polarization because it “...erodes democratic norms and institutions, and diminishes trust in government – especially among partisans of parties that are currently out of power” (Westwood, 2015). The growing concern to American democracy rests in extreme partisan division — one that is not driven by mere policy differences, but a deeper rooted resentment based on an identification that does not align with their own. Increased rates of affective polarization hinders the ability for individuals of differing ideological backgrounds to unify or reach a compromise on certain policy, resulting in a stalemate of action on the legislative level. As a result, it is important to analyze changes in American affective polarization because the growing attachment to one’s own partisan identity hinders the existence of political topics to undergo the Milian marketplace of ideas, which not only tests these ideas but also develops them into more refined versions. This is due to the fact that affective polarization is causing individuals to be more concerned with the victoriousness of their own party, rather than actively engaging in their specific issue positions.

For my analysis, there are two key terms in regards to how individuals differ in the correlation between their views on specific issues with their partisan identity that are necessary to understand: issue alignment and issue partisanship. Issue alignment refers to the degree on how consistent and correlated one’s issue positions are with others (Kozlowski, 2021). Higher

issue alignments mean that an individual's stance on certain issues are ideologically consistent, and can more easily predict their stances on other issues. This idea allows political scientists to capture the complex nature of politics to a single ideological position to better predict how the public will react to certain issues. Next, issue partisanship refers to the tendency of individuals to allow their party affiliation to shape and influence their own views regardless of what they may believe.

The reason why I am researching affective polarization and expansion on healthcare to undocumented immigrants is because there has been a steady increase in negative views by Californians of their opposing party from 27% in July 2022 to 33% in 2023, according to a study performed by the Public Policy Institute of California. The topic of affective polarization in correlation to public opinion on the expansion of Medi-Cal to undocumented immigrants is significant to California public policy because there has been a growing sentiment to repeal the recent expansion of Medi-Cal to all income-eligible adults, regardless of immigration status, in 2024. Denying access to healthcare for undocumented immigrants completely overlooks their massive importance to the California economy because they are a vital part of multiple sectors of the workforce such as agriculture and hospitality. Affective polarization is an often overlooked aspect to the success or denial of certain healthcare policies because individuals of differing partisan identities are not voting based on a comprehensive review of ideologies, but rather are being easily influenced by polarized political elites to vote along party-lines. I am conducting this study to illustrate how the increased affective polarization rates are creating sentiments that are causing negative public opinions towards state governments creating laws to support the healthcare rights of undocumented immigrants.

Literature Review:

In a research article by Johnathon Oberland, he illustrates how partisan polarization shapes health policy and politics in the United States by examining ways in which past healthcare programs' implementation, such as the Affordable Care Act, has been impacted by the United States' increased partisan polarization. The article provides a brief history about how healthcare was not a topic that had been fought heavily on partisan lines in the 1950s. Although, in more recent years, the increasing partisan polarization is causing parties to repeal and undermine new healthcare laws instead of accepting them. According to Oberland, this can be attributed to polarized populations being easily persuaded by elite rhetoric and interpreting media information only according to their partisan identities. Furthermore, the article demonstrates how a polarized environment makes it "...harder to mobilize new constituencies and by weakening a program's implementation in ways that reduce or obscure its benefits and hinder both its effectiveness and entrenchment" (Oberland, 2024). Polarized regions who are in opposition to new policies disrupt the implementation of these bills through judicial activism in which they bring about legal challenges to their state courts in an attempt to impede implementation. While this article provides an insightful analysis on ways that healthcare laws in a polarized region can be curtailed by opposing populations, the gap in this article that my research would be able to fill is how a state-specific health care policy, Medi-Cal, is impacted by affective polarization rates in a singular state. Much of the research performed about affective polarization in the United States focuses on a national scale, whereas my research seeks to narrow that focus on a state-level. The research I am conducting focuses on a state-level healthcare program and how affective polarization impacts how the public views expansions of the program to undocumented immigrants.

In Delia Baldassarri and Andrew Gelman's research article, they examine how the positive correlation between growing party polarization and a party's effectiveness on sorting individuals along stricter ideological lines causes greater public opinion polarization on a certain set of key issues. While studies have shown that intergroup polarization is scarce with respect to age, gender, or education, it has been proven that changes in public opinion are greatly distinguishable based on "ideological lines" and party affiliation (Abramowitz, 2005). The growing resentment based on party affiliation is increasing the issue partisanship among the American public, specifically pertaining to issues on social welfare, healthcare, and moral issues (Baldassari, 2008). Since there is a great polarized distance pertaining to issues on social welfare and health care, my research plans to identify how a specific state health-care program's expansion to undocumented immigrants is receiving great scrutiny among Republican identifying individuals. This can be attributed to the growing sentiment of Republican voters aligning their views based on their party affiliation rather than their own synthesis on the given topic.

The role of partisan elites in influencing their party's voter's views on contentious topics has grown immensely as there is "...virtually full agreement among scholars that political parties and politicians, in recent decades have become more ideological and more likely to take extreme positions on a broad set of political issues" (McCarty, 2006). The issue in the role of partisan elites in effecting affective polarization is that individuals who do not have the opportunities to synthesize their own views and are less educated than their counterparts rely too heavily on their party's ideologies because the growing resentment among political elites is backed more by maintaining their own partisan initiatives and candidates rather than providing their affiliates with a comprehensive view on a certain issue.

Hypothesis/Causal Mechanism:

My conceptual hypothesis is that *increased polarization rates would increase public opinion on ideologically divisive topics among Democrats and decrease among Republicans.*

The operational hypothesis is: *the increased national polarization rates would differ public opinion on Medi-Cal expansion to undocumented immigrants depending on the partisan affiliation of the participants.* For individuals that identify as Republican, I hypothesize that there would be a decrease in public opinion rates on the topic of supporting the expansion of Medi-Cal to undocumented immigrants, but would increase among those that identify as Democrats on the same topic.

While an individuals' issue attitude may not necessarily become more comprehensive overtime, there is a strong correlation between party polarization and effectiveness for political elites to organize voters on their party's ideological lines, as Baldassari states: "Party voters are more divided and therefore constitute an easily identifiable target for a party elite concerned with preserving its constituency" (Baldassarri, 2008). Due to the great influence that party elites have in influencing voter's opinions on ideologically divisive topics such as healthcare expansion to undocumented immigrants, the main causal mechanism of my research would be elite cues, which are when prominent political figures can shape public opinion because the average citizen looks to these elites for guidance on developing opinions on certain issues that are too complex.

Research Design and Research Methods:

The independent variable of my research is national polarization rates from 2012 to the present. While my initial operationalization of the independent variable was going to focus on California affective polarization rates specifically, the existing data on affective polarization rates on a state-level is disaggregated. Due to this, much of the data on affective polarization in

California was performed by different organizations and the process in which they measured the polarization rates differed greatly, resulting in rates that were likely not reflective of California's polarization if I were to pool data from different organizations. As a result, I had to pivot my research to focus on affective polarization rates on a national level because while national polarization rates are not entirely reflective of an individual states' polarization rates, a party's rhetoric and manner in which they influence the views of their party's voters are fairly similar on a national scale. Due to this, I gathered data on effective polarization rates from the American National Election Studies (ANES) from 2012 to 2024, as their organization gathers data every Presidential election cycle which is every 4 years. ANES measures affective polarization rates based on a feeling thermometer rating of own's own party and the rival party on a 0-100 scale: 0 being the coldest and 100 being the warmest.

My dependent variable for the research will be public opinion on the topic of Medi-Cal expansion to undocumented immigrants. Due to how specific of a topic Medi-Cal expansion to undocumented immigrants is, the only public opinion data on this topic that was conducted was by the Citrin Center For Public Opinion Research in 2025. As a result, I had to pivot the manner in which I collected this data to focus more broadly on a topic that was more broad, but still maintained the sentiments of the state government supporting the legal rights of undocumented immigrants. After immense research for public opinion data on this topic, I utilize data by the Public Policy Institute of California's (PPIC) Statewide Survey data. The PPIC Statewide Survey offers nonpartisan information on public opinion regarding public policy preferences of California residents since 1998. The PPIC state survey conducted online interviews with around 1,700 California adult residents in both English and Spanish according to the respondents' preferences on a multitude of social, economic, and political questions to test their attitudes.

Although, the data that I am gathering from the survey is California residents' attitudes on the question: "Do you favor or oppose the California state and local governments making their own policies and taking actions, separate from the federal government, to protect the legal rights of undocumented immigrants in California?" The responses differ from the affective polarization rates because this public opinion data is based on a binary scale: favor or oppose. Although, public opinion will be measured based on the percent of the given cohort that is in favor and opposes, thus will be a continuous variable. Furthermore, while the PPIC has surveyed data every year since 1998, I am only collecting data from each presidential election year, every 4 years, to keep it consistent with the affective polarization rates from ANES.

Furthermore, I am researching two different control variables that may have an influence on the relationship between affective polarization rates and California resident's attitudes towards the state government creating policy, such as Medi-Cal, to support the legal rights of undocumented immigrants: partisan affiliation and race/ethnicity. I am utilizing these specific categories because research performed on voting behavior and party alignment has illustrated the "...importance of traditional social cleavages of class, race, and religiosity in determining voting behavior" (Baldassarri, 2008). While I would like to focus on specific regions within California to see trends in affective polarization rates, a confounding issue is that there is not enough research and data on affective polarization rates in specific areas within California. I will be measuring these control variables utilizing PPIC Statewide Survey Data on the same question used for my dependent variable because the PPIC organizes the data based on California residents' opinion overall, as well as how different categories of adults voted such as their party-affiliation as well as ethnicity. The three different categories of party affiliation will be Democrat, Republican, and Independent. The four different races that will be measured are

African Americans, Asian Americans, Latinos, and Whites because these are the ethnicities that the PPIC data has provided.

I have conducted a time-series analysis in all of California from 2012 to the present because I am attempting to examine the correlation between affective national polarization rates and their impact on public opinion pertaining to Medi-Cal expansion to undocumented immigrants in California. The reason my temporal scope is between this time frame is because 2016 is when Medi-Cal eligibility first expanded to all low-income children regardless of their immigration status with SB75 in 2016, and since then, Medi-Cal has gradually expanded to all income-eligible adults regardless of immigration status: SB104 in 2020 that expanded eligibility to young adults under the age of 26, AB133 which expanded the eligibility to all income-eligible adults age 50 and older in 2022, and SB184 which extended the full scope of Medi-Cal benefits who is 26 to 49 years of age that went into effect in 2024. The reason I am conducting research starting in 2012 rather than 2016 is because it allows me to view the polarization rates prior to the expansion to Medi-Cal, and how that may have affected the attitudes of Californians.

Although the PPIC public opinion survey data was collected using a binary scale, I am not measuring the public opinion rates by the number of individuals that voted “in favor” or “oppose”, but rather the percentage of individuals that were in support of the state government protecting the legal rights of undocumented immigrants. While I wanted to measure public opinion based on the number of individuals that would be in favor or in opposition, the PPIC does not survey the same number of participants that identify with each party and of a certain race every year. For example, the PPIC surveys around 500 to 600 participants that identify as Democrats, whereas they only survey 300 to 400 Republicans and Independents each year. As a result, the data I collect would have been skewed overwhelmingly “in favor” of a Medi-Cal

expansion if I had measured based on the number of individuals. To combat the varying number of participants that identify with each category that are surveyed, I determined that measuring the participants' responses based on the percentage of individuals from that category would more accurately represent and predict the responses of the majority of Californians. Being that I am measuring public opinion by percentage, it would make public opinion on the topic of Medi-Cal expansion to undocumented immigrants a continuous variable. As a result, I conduct two different Pearson's r tests to quantify how strong of a correlation affective polarization rates based on a feeling thermometer has on public opinion rates based on partisan identity and race.

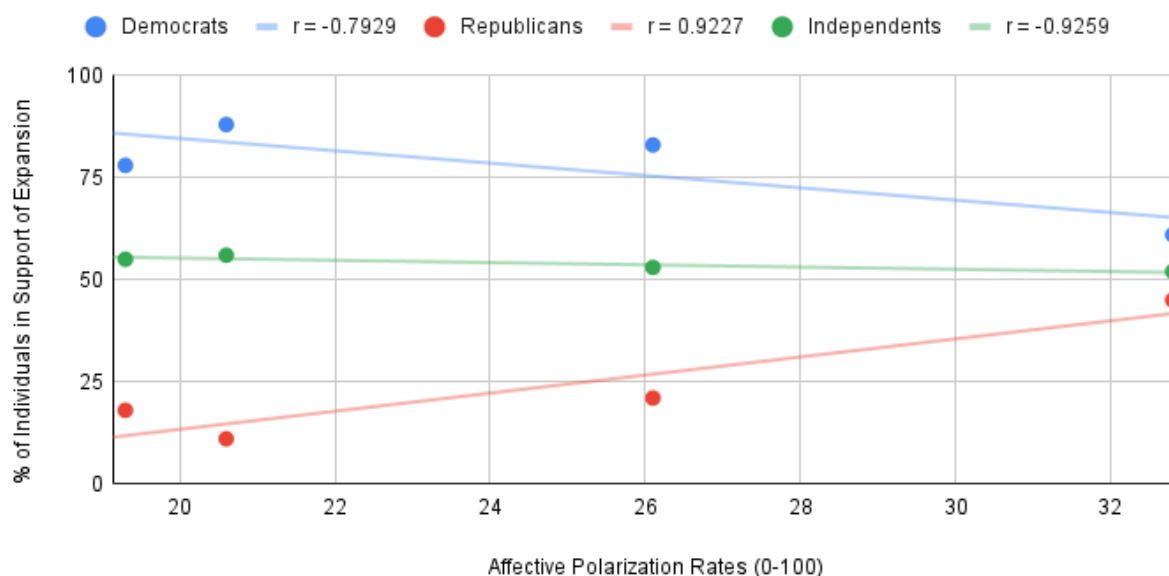
Results:

As previously anticipated, there was a positive correlation with a decrease in out-group feelings — meaning a more resentful attitude towards individuals of rivaling-parties — and a decrease in Republicans that would be “in favor” of the state government creating laws such as Medi-Cal to extend towards undocumented immigrants. Along with this, there was a negative correlation with a decrease in affective polarization rates and an increase in the percentage of Democrats that would be in favor of Medi-Cal expansion to undocumented immigrants.

As mentioned in Figure 1, the “ r -value”, or the correlation coefficient measures the strength and direction of the relationship between two continuous variables. The correlation coefficient is then evaluated on a $-1 < r < +1$ scale where an r -value closer to -1 indicates a negative correlation, whereas an r -value closer to $+1$ indicates a positive correlation. An r -value that is closer to 0 indicates that there is a weak or no correlation. While there is a very high

Figure 1. Public Opinion Rates Based on Partisanship vs. Affective Polarization

Data Sources: Public Policy Institute of California Statewide Survey from 2012-2024, American National Election Studies on "Affective Polarization of Parties"

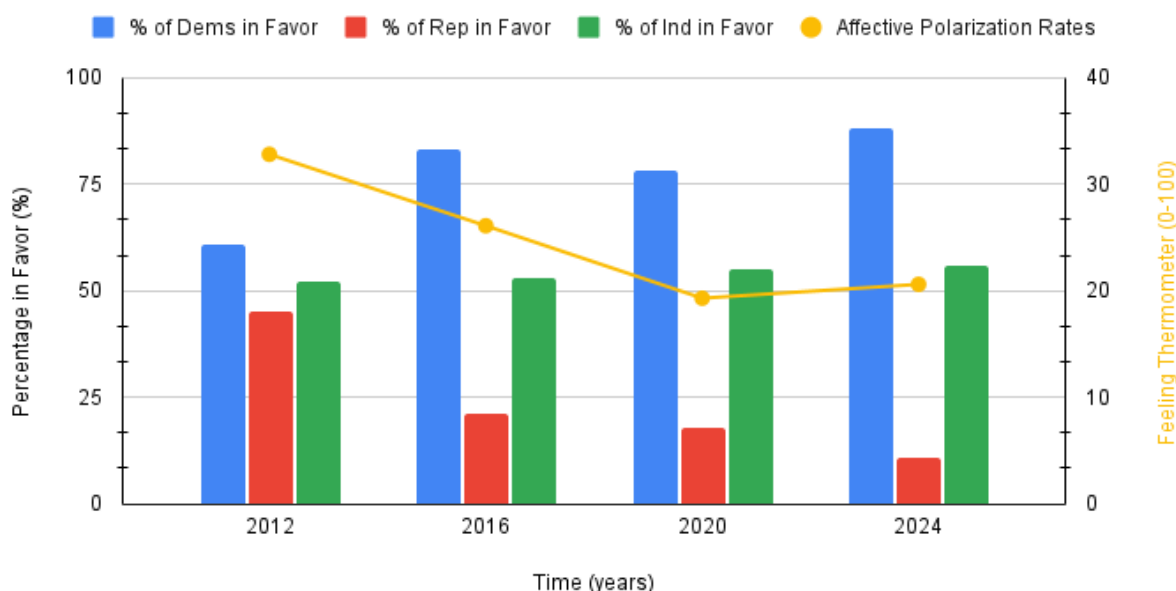


positive correlation among Republicans with an r-value of 0.9227 and a very high negative correlation among Independents with an r-value of -0.92529, correlation coefficients that fall within $.90 < r < 1.00$ or $-.90 < r < -1.00$ are viewed with great skepticism because the direction or relationship of variables are generally not “extremely” positively or negatively clear. The high correlation coefficients for the Republicans and Independents can be ascribed to a narrow range of data. Being how recent the first Medi-Cal expansion was in 2016 with SB75, the PPIC had not started conducting public opinion surveys with the specific question about the state government creating laws, such as Medi-Cal expansion, for undocumented immigrants until 2012. Due to this, there was minimal data that I could utilize within my analysis.

As seen in figure 2, rival-party feelings had dropped 12.2 points on the feeling thermometer from 2012 to 2024, which is a 37.195% decrease. It is important to recognize that 2016 was the year that resulted in the greatest differences in affective polarization rates and public opinion among Democrats and Republicans.

Figure 2. Relationship Between Affective Polarization Rates and % of Individuals "In Favor" for Medi-Cal Expansion Based off Partisanship from 2012-2024

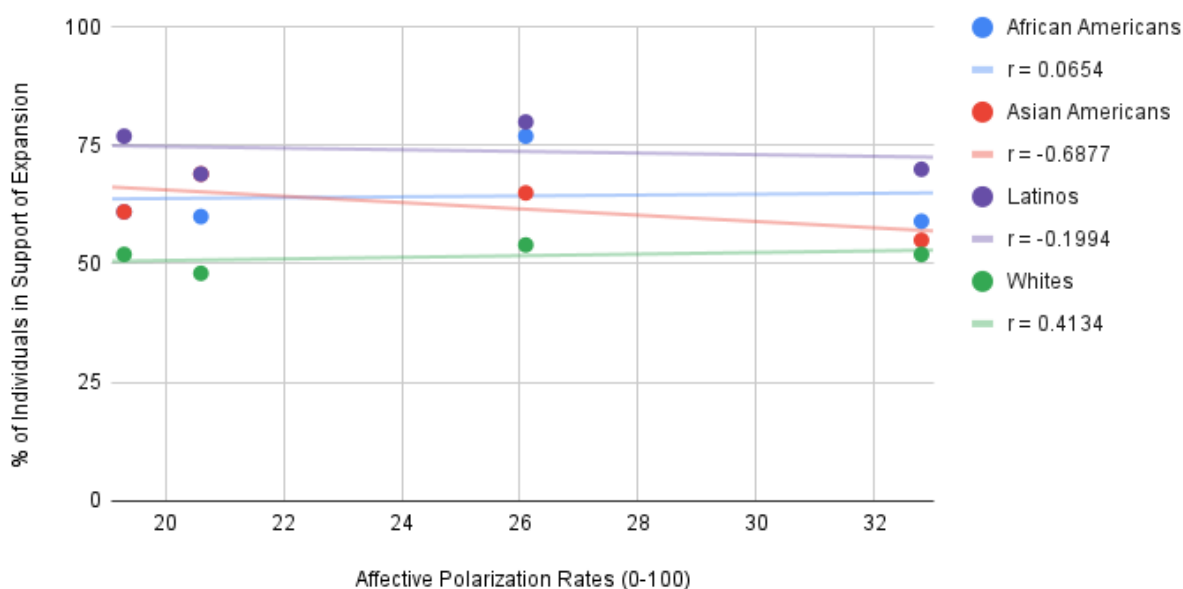
Data Sources: Public Policy Institute of California Statewide Survey from 2012-2024, American National Election Studies on "Affective Polarization of Parties"



While the average rate that public opinion increased among Democrats was 1.9% every four years, the percentage of Democrats that were in favor of expansion to undocumented immigrants increased from 61% in 2012 to 83% in 2016, resulting in an increase of 22%. Furthermore, the average rate that public opinion decreased among Republicans was 2.625% every 4 years, the public opinion had its greatest decrease from 45% of Republicans “in favor” in 2012 to 21% in 2016, which was a 24% decrease. After the drastic change in affective polarization rates and public opinion rates among Democrats and Republicans, public opinion rates remained relatively constant with little to no change in their measurements: Democratic support for Medi-Cal expansion remained around 80% “in favor” and Republican support remained around 15% “in favor”. Although, I found that affective polarization had its greatest dip in out-group feelings again in 2020, but public opinion rates still remained relatively constant and did not change with the decrease in polarization.

Figure 3. Public Opinion Rates Based on Race vs. Affective Polarization

Data Sources: Public Policy Institute of California Statewide Survey from 2012-2024, American National Election Studies on "Affective Polarization of Parties"



Along with partisan identity, I measured the correlation between affective polarization rates with how adults of different races — African Americans, Asian Americans, Latinos, and Whites — felt about Medi-Cal expansion to undocumented immigrants. After conducting another Pearson's r to test the strength of the correlation between the two variables, it can be concluded that there is very little correlation between the decreases in affective polarization rates to public opinion from Californians of different races on this topic. As seen in Figure 3, other than for Asian Americans, the r -value of the different ethnicities remained close to 0. Furthermore, there were no significant changes or differences between responses of those of different races across the temporal scope that was studied. On average, the percentage of individuals of these different ethnicities in favor of Medi-Cal expansion is: 64.25% among African Americans, 62.5% among Asian Americans, 74% among Latinos, and 51.5% among Whites. Along with this, there were no drastic changes in public opinion from 2012 to 2024 as there was for those of different partisanships.

Discussion & Implications:

In my research, I studied how affective polarization rates affected public opinion for the expansion of Medi-Cal to undocumented immigrants since 2012 in California. While there are possible trends that prove my hypothesis to be true, I cannot make a definitive conclusion that affective polarization rates played a major role in causing the drastic changes in public opinion on expansions to undocumented immigrants.

Following the drastic change in my variables in 2016, the public opinion rates for those of different partisanship remained relatively stable. While affective polarization rates experienced another major shift in 2020 with a 6.8 decrease on the feeling thermometer, this can be attributed to the effects of the mass hysteria of the COVID-19 pandemic amongst the American public. After the two major changes in affective polarization that occurred in 2016 and 2020, polarization rates have remained stable with public opinion rates on the topic of Medi-Cal expansion. The analogous change in public opinion and affective polarization rates, followed by a period of stable rates hint towards a possibility of correlation between my two variables. Despite there being trends of correlation, I am still hesitant to make a definitive conclusion because not enough research has been performed for long enough about state governments creating new laws such as Medi-Cal to support the rights of undocumented immigrants, and an inconsistent conduction of affective polarization in the United States.

Although there are skeptically high correlation coefficients, that doesn't render my data completely useless as there were clear trends within the data that could point to possible conclusions of correlation. The immense change in polarization and public opinion rates among Democrats and Republicans in 2016 can be an attribution to increased anti-immigration rhetoric after President Donald Trump was elected in 2016. The newly polarized region that California

has become is causing individuals with opposing partisan identities to maintain views that are within their partisan lines, and vote on policy that is consistent with the polarizing ideologies of their partisan elites. This is an identification of an increase in issue partisanship among Democrats and Republicans, due to the consistently high percentage of those in favor and in opposition to Medi-Cal expansion (Figure 2). Jonathon Oberland has demonstrated how individuals living in a polarized environment make it harder for new healthcare programs that were enacted by those of the opposing party to achieve implementation that is successful, or even try to reduce the effectiveness of the program (Oberland, 2024). Despite the expansion benefitting thousands of undocumented immigrants who play a vital role in the economy, polarizing ideologies that portray undocumented immigrants as “harmful” to the socioeconomic status of California are not given the full scope of the viewpoints on this topic. The increased issue partisanship causes individuals to be more susceptible to be influenced by polarizing ideas that are fed by their party’s political elites to motivate their own political agenda, instead of providing their party’s members with a nuanced view of how important undocumented immigrants are to California and why expanding and providing access to healthcare is so integral to their safety.

Along with my research on the relationship between affective polarization’s effect on public opinion among those of different partisanships, I researched if there would be any relationships between polarization and public opinion among those of different ethnicities. While it has been proven that race is one of the main factors that determine voting behavior on specific topics, my research has discovered little to no correlation between the changes in polarization to individuals of different races' opinions on Medi-Cal expansion to undocumented immigrants (Baldassari, 2008). The public opinion rates of all the ethnicities that I studied were unvaried

throughout 2012 to 2024. Affective polarization may have a small impact on the attitudes of those of different races, but there is not a significant correlation on this specific topic that can determine a clear relationship.

Research Limitations:

As previously mentioned from Figure 1, the r-values of Democrats, Republicans, and Independents were extremely high which raised great skepticism because accurate and large datasets do not typically have “extreme” r-values. The extreme r-values can be attributed to the limited range of data that I was measuring. While I wanted to include more data points to my research, there were two factors that prevented me from increasing the size of my data sample: minimal public opinion survey data on this specific topic and the inconsistency in which affective polarization is measured. Since Medi-Cal had only begun its expansion in 2016 with SB75, research institutes such as the PPIC had not been conducting surveys that included questions relating to the California government creating new laws or expanding laws to protect the rights of undocumented immigrants till at the earliest 2012. As a result, there is very limited data that has been collected pertaining to this specific topic. Furthermore, even if I had desired to include the public opinion rates every year to increase the data sample, affective polarization surveys regarding in-group and out-group feelings are conducted every presidential election cycle, which is every 4 years. Due to this, I was forced to match the public opinion data from every year that affective polarization rates were measured. In order to make a more definitive conclusion in the future, public opinion research on this specific topic must continue to be conducted, as well as that affective polarization rates should be measured every year instead of every presidential cycle in order to increase the sample data for a more accurate correlation coefficient. On top of this, since affective polarization is not measured consistently and on an

annual basis in California, I was forced to utilize national affective polarization rates rather than affective polarization within California. Although national polarization rates are generally reflective of most states, having a continual study on affective polarization on a state-level would provide a more accurate conclusion.

Furthermore, an aspect of my research that I wished I had incorporated if given more time would be to measure how much of an impact partisan elites had in influencing the views of Californians of different partisanship on Medi-Cal expansion. Being that the influence of partisan elites is a possible explanation to the drastic changes in public opinion in recent years on expansion to undocumented immigrants, having a statistical value that confirms my reasoning would provide a more concrete analysis on how much of a role partisan elites play on this topic.

Conclusion:

My research has demonstrated how there are trends that suggest that affective polarization has an impact on the public opinion rates of those of different partisan identities on the topic of Medi-Cal expansion to undocumented immigrants, but more research needs to be performed for me to have a more definitive conclusion on the matter. The rise of affective polarization in the United States is creating greater division on topics such as Medi-Cal expansion to undocumented immigrants which prevents any cooperation to discuss the matter. With more polarizing sentiments being perpetuated by partisan elites against undocumented immigrants, public opinion among Republicans, and especially those that are aligning their views along partisan lines and with their political elites are overlooking the importance of undocumented immigrants to the state of California. With their massive importance to the labor force and driving economic growth, affordable healthcare in the form of Medi-Cal is essential and a basic human right that needs to be extended to undocumented immigrants. It is necessary

that individuals seek out nuanced perspectives on topics such as healthcare to undocumented immigrants because through my research, it has suggested that the polarizing views of partisans are affecting how in favor the public would be on an expansion of Medi-Cal to them.

Works Cited

- Abramowitz, Alan & Saunders, Kyle. (2005). Why Can't We All Just Get Along? The Reality of a Polarized America. *The Forum*. 3. 10.2202/1540-8884.1076.
- American National Election Studies (ANES). (n.d.). *Affective polarization of parties: Own-party and rival-party feelings, 1978–2024* [Data chart]. In *ANES Guide to Public Opinion and Electoral Behavior*. Retrieved November 16, 2025, from https://electionstudies.org/data-tools/anes-guide/anes-guide.html?chart=affective_polarization_parties.
- Baldassarri, D., & Gelman, A. (2008). Partisans without constraint: Political polarization and trends in American public opinion. *American Journal of Sociology*, 114(2), 408–446. <https://doi.org/10.1086/590649>.
- Gidron, Noam, et al. *American Affective Polarization in Comparative Perspective*, 2 Nov. 2020, <https://doi.org/10.1017/9781108914123>.
- Kozlowski, A. C., & Murphy, J. P. (2021). Issue alignment and partisanship in the American public: Revisiting the ‘partisans without constraint’ thesis. *Social Science Research*, 94, Article 102498. <https://doi.org/10.1016/j.ssresearch.2020.102498>
- “PPIC Statewide Survey Data.” *Public Policy Institute of California*, www.ppic.org/survey/survey-data/. Accessed 6 Dec. 2025.

Oberlander, Jonathan. "Polarization, partisanship, and health in the United States." *Journal of Health Politics, Policy and Law*, vol. 49, no. 3, 1 June 2024, pp. 329–350, <https://doi.org/10.1215/03616878-11075609>.