Department of Politics and Public Administration

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Comparative politics and public policy
Adj. Prof. Dr. Michael Dobbins
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Self-undermining feedback in US healthcare reform: Why change in 2008?

Iordanis Pantzartzis[1]

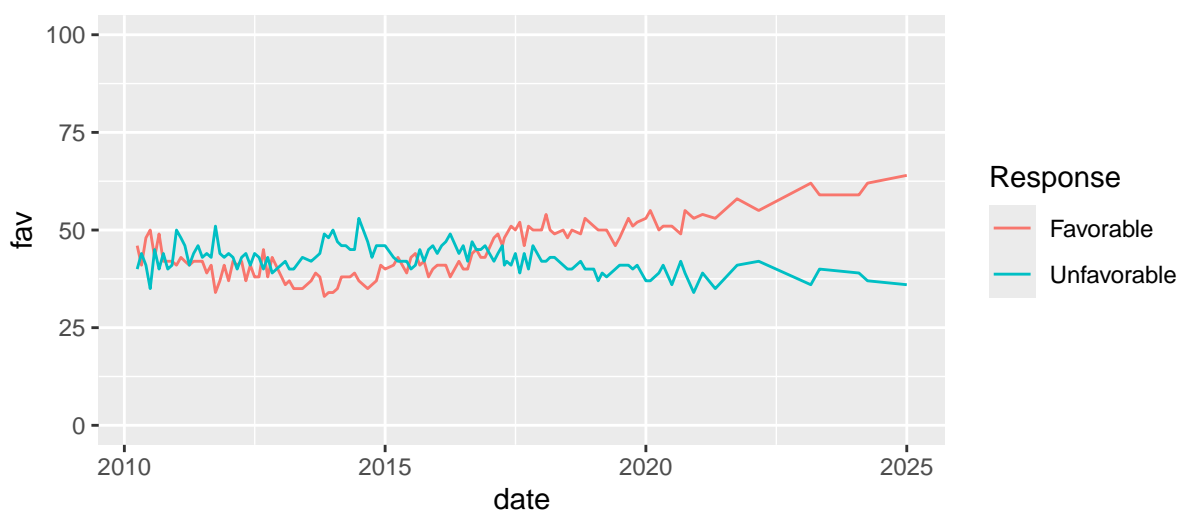[1]Universität Konstanz, 01/1001158

Abstract
Placeholder

Keywords: path-depdendency, healthcare

Introduction

When (then candidate) Donald Trump was asked in his, first and only, presidential debate with Democratic opponent Kamala Harris what his plans for healthcare reform were, his response that he had "concepts of plan" (Trump, 2024) rekindled some discourse as to the future of American healthcare and potential reforms in that sector. Ever since it was passed, Republican lawmakers, in conjunction with candidate and president Trump, have at times alternately advocated for – and attempted – repealing President Barack Obama's signature healthcare reform, the Patient Protection and Affordable Care Act (abbreviated as ACA, commonly also referred to as "Obamacare"), outright, or making major modifications to the law (Armour et al., 2024). However, neither a repeal or a major modification ever came to pass, despite Republicans gaining control of the White House and both Houses of Congress following the 2016 general election (Federal Election Commission, 2017). Three Republican Senators voted to *not* repeal Obamacare, Senator John McCain, as was highly publicized at the time, voting no via thumbs-down on the Senate floor, less than two days after receiving surgery for brain cancer (Davis & Montanaro, 2017). Beyond any individual-level intuitions for this specific legislative outcome, the question is *why were Republicans unable to repeal or reform the ACA?* One explanation might be public response – in the time since its passage, the ACA's popularity has somewhat transformed, from being viewed rather controversially in the beginning, to now (early 2025) enjoying its largest net positive favorability ever (see Figure 1):

Figure 1. Affordable Care Act favorability 2010-2025.

Note: Data source Kaiser Family Foundation (2025)

As Busemeyer et al. (2019) have noted, already during Trump's first term, this leads credence to the idea that policy feedback follows a *thermostatic* (Wlezien, 1995), or negative, pattern, wherein (proposed) policy change in any kind of direction is *counterbalanced* by the public's response. In this view, *policy stability* is the consequence of negative feedback. This implies that Republicans haven't been At the same time, Busemeyer et al. (2019) also point out that the same empirical artefact may support a H

By contrast, Historical Institutionalists propose that policy decisions

In this paper, I will discuss Jacobs and Weaver's 2014 theoretical conception of self-undermining feedback effects, that incorporate a notion of negative feedback into classical Historical Institutionalist approaches, and their case study, in which they employ their theory explain why healthcare reform was passed in the US in 2010, but not in the 1990s, the previous high-profile attempt to do so on the Federal level. Finally, I will extend some

Theoretical argument

Jacobs and Weaver (2014) expand on the existing policy feedback literature and

Jacobs and Weaver's 2014 argument

Discussion

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