POLICY ISSUE NETWORKS IN THE STATE CHILDREN’S HEALTH INSURANCE PROGRAM (SCHIP) IN ILLINOIS: A LONGITUDINAL CASE STUDY

A Dissertation in Public Administration

by

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Abstract

In policy processes large numbers of actors who hold various forms of scientific and technical information, beliefs, and values interact with each other in political and institutional contexts. The purpose of this study is to investigate the complex policy processes in the health policy area in Illinois, using two theoretical lenses: the policy network theory (PNT) and the advocacy coalition framework (ACF). The PNT helps us understand the complex networked relationships among the actors of public policy processes. The ACF helps us explore more specifically the belief systems of network actors and the roles such beliefs play in policy network formation and policy change. Using the PNT and the ACF frameworks, in this dissertation I examined the policy network characteristics and policy changes in the case of the State Children’s Health Insurance Program (SCHIP) in Illinois from 1997 to 2007. In my study I used AutoMap, a network analyses tool, and ORA, a dynamic network analysis tool. Using this combination of methods, I extracted meta-networks from the newspaper articles on the SCHIP process in Illinois and analyzed them to identify the policy networks and subnetworks (subgroups) and the values attached to these subgroups.

I first discuss the background of the Illinois SCHIP policy process and the theoretical frameworks I applied in my study (PNT and ACF). After describing and discussing the analytical tools I used (AutoMap and ORA), I present the findings on the structural characteristics of policy networks in the Illinois SCHIP policy process. Next I present the results of a series of cluster analyses, which revealed the groups of actors who formed the advocacy policy coalitions, and compare these results with the predictions of the ACF. I found that in the SCHIP Illinois case and in the period I studied the
predictions of ACF were only partially confirmed: I could identify some pro- and against-policy coalitions, but their membership or the values attached to them were not consistent between 1997 and 2007. Instead, ORA identified the clusters of networks (subnetworks) of policy actors and their beliefs. I conclude that in interpreting the findings it is better to use the relatively broader term of “policy issue networks” or “policy issue coalitions,” instead of the ACF’s more specific term of “advocacy coalitions.”

My dissertation makes a contribution to the policy literature by introducing innovative methods of network text analysis (AutoMap) and dynamic network analysis (ORA) to identify policy networks and subnetworks in texts. It also makes a contribution by presenting an understanding of the interplay between key policy actors and their beliefs and network characteristics. The methods applied in this dissertation may be used in future studies on policy processes and the findings may be compared with those of future studies to gain a better understanding of policy networks.
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CHAPTER 1. INTRODUCTION

With the passage of the Balanced Budget Act of 1997 at the federal level in the United States, the State Children’s Health Insurance Program (SCHIP) has provided health care coverage for children in families whose earnings are above the maximum state limits to qualify for Medicaid but cannot afford private health insurance. SCHIP is administered by states within broad federal guidelines. State expenditures for SCHIP qualify for federal matching funds. The SCHIP program was authorized and funded initially for a ten year period. The annual federal allotments to states for SCHIP funding were capped. Facing the expiration of SCHIP on September 30, 2007 and the uncertainty of its reauthorization at the federal levels, state policy makers were forced to change their SCHIP programs. While some embraced SCHIP as an important part of their strategies to reduce the number of uninsured children in their states, others declined to implement any expansions and capped program enrollments to avoid funding shortfalls (Kaiser Commission on Medicaid and the Uninsured [KCMU], 2008).

After the authorization of SCHIP in 1997, contentious debates over program creation and implementation began among state policymakers and policy stakeholders. The contentious nature of the debates increased the complexity of the policy process during the state-level implementations of SCHIP and the federal-level efforts to reauthorize it. Large numbers of actors try to influence policy processes to achieve their own goals; these actors interact with each other in broader political and institutional contexts (Klijin, 1996; Weible, Sabatier, & McQueen, 2009). Policy network theorists
point out that networked relationships among interdependent actors develop around policy problems or policy programs (Kickert, Klijn, & Koppenjan; 1997). They argue that horizontal network relations characterize policy networks, more so than relations within traditional and hierarchical structures.

In this study, I investigated the policy processes in the state health policy arena, particularly the SCHIP policy process in Illinois. In my investigation I combined the theoretical and analytical insights of the policy network theory (PNT) with those of the advocacy coalition framework (ACF). More specifically, I examined the characteristics of the policy networks in the SCHIP policy processes in the state of Illinois between 1997 and 2007, and how the structural characteristics of these networks affected the policy changes and outcomes. The PNT provided an overall framework for my study by allowing me to apply network analysis tools to analyze the structural configurations of policy networks in the case of Illinois SCHIP (Compston, 2009). The ACF posits that actors form policy coalitions (i.e., networks) based on similar beliefs and policy preferences (Sabatier & Jenkins-Smith, 1993; Sabatier & Weible, 2007). So I applied the ACF particularly to understand the roles of the beliefs of the actors of policy networks in the formation of those networks.

1. **Background of the Problem**

   The U.S. Congress has taken several measures to assure access to health insurance for low-income children and pregnant women, beginning with the creation of the Medicaid program in 1965. Traditionally, Medicaid was available only to specific populations, such as those who qualified for the Aid to Families with Dependent Children
(AFDC) program, those low-income people who were old and disabled, and those who were medically needy. Beginning in 1984, the link between AFDC and Medicaid eligibility was relaxed, so that Medicaid eligibility could be expanded to low-income children who did not qualify for AFDC. From 1986 to 1992, Medicaid eligibility for pregnant women and children were expanded, and they occurred through both federal mandates and optional state expansions.

The most recent attempt to ensure that all children in the U.S. have adequate access to medical care was through the passage of Title XXI, State Children’s Health Insurance Program (SCHIP), of the Balanced Budget Act of 1997. Title XXI allows states to receive enhanced federal matching funds for their programs that are designed to reduce the number of uninsured, low-income children. They are eligible to receive the funds if they (a) expand their Medicaid income eligibility threshold, (b) create new state programs to insure low-income children not eligible for Medicaid, or (c) use a combination of these two approaches. States were allowed to receive the enhanced federal matching funds for approved expansions, beginning October 1, 1997 and for the fiscal years 1998 and 1999. Between 1997 and 1999, forty six states took advantage of these opportunities and received a total of approximately $1 billion in enhanced federal matching funds. By the end of the fiscal year 2000, all states had implemented Title XXI expansions (Johnson, DeGraw, Sonosky, Markus, & Rosenbaum, 1997; Joseph, 2007; Oberlander & Lyons, 2009).

The expansion of health coverage through the State Children’s Health Insurance Program (SCHIP) has significantly reduced the number of uninsured children. With the adoption of the Balanced Budget Act of 1997 by the U.S. Congress, SCHIP has provided
health care coverage for children in families who earn at levels higher than the maximum to qualify for Medicaid but cannot afford private health insurance. In this sense, SCHIP played a major role to close the coverage gap between the children covered by Medicaid and private insurance programs. The SCHIP enrollments in the states increased rapidly during the program’s first five years and more than four million children were enrolled in the state SCHIPs as of June 2007 (KCMU, 2008). Despite its success in helping reduce the rate of the uninsured among low-income children, President Bush vetoed the reauthorization. This federal policy change negatively affected enrollment in the SCHIP expansions in states.

In Illinois there were continuous and growing interests among policy makers in expanding health care coverage for low-income children through both Medicaid and SCHIP since the late 1990s. At the time of the passage of SCHIP at the federal level in 1997, the Illinois Medicaid program covered pregnant women, infants, and almost all children at the federally required minimum levels. Following the federal legislation of SCHIP in 1997, Illinois created a combined Medicaid and SCHIP program (“KidCare”) in 1998. In 2005 Illinois enacted the landmark legislation authorizing the “All Kids” program to provide health insurance coverage for every child in the state from birth through age 18, regardless of income (Gifford, Morgan, Marks & Trenholm, 2008). The policymaking processes were not easy or straightforward. Driven by a range of ideologies and personal experiences and conflicting research findings, actors of the policy arena of SCHIP authorization and reauthorization were involved in increasingly intense and polarized debates around issues such as the magnitude of the child health insurance problem, assessments, and policy implementation process. In this study, I focused on the
case of the Illinois SCHIP policy processes between 1997 and 2007. The year 1997 is the starting point of my study because it was when the SCHIP legislation was passed in Illinois. The year 2007 is the logical end of the period, because SCHIP was reauthorized then and the active discussion around SCHIP at the state level waned.

2. Statement of the Problem

There has been little doubt that SCHIP is one of the successful programs at both the federal and state governments used to respond to the problems of low-income uninsured children. After SCHIP was adopted in August of 1997, states quickly enacted their own SCHIP programs and relevant outreach programs to find and enroll eligible, low-income uninsured children. During the fiscal year of 2007, a total of thirty-four states experienced growth in their SCHIP child enrollments. A large body of literature has centered on descriptive explanations of the process and evaluation reports of the program (e.g., Brandon, Chaudry, & Sardell, 2001; Cunningham, 2003; Cunningham & Kirby, 2004; Davis, 2002; Kronebusck & Elbel, 2004; Oluwole, 2006;).

SCHIP is administered by states, with federal financing provided through matching grants. Although states have more flexibility in designing and implementing the SCHIP programs, compared to other block-grant programs (e.g., Medicaid), a common tension still existed between the federal and state actors involved. These tensions increased the political conflicts and maneuvers in the policy processes and consequently the complexity of the processes.

Some studies paid special attention to the complex and political nature of the SCHIP program. The authors of these studies argued that SCHIP was the product of a
series of policy and political compromises and the role of politics and ideology was crucial in the health care reform issue (Monheit, 2008; Rosenbaum, 2008; Weisert & Weisert, 2006). An empirical study using random-effects GLS regression model partly supports that political factors influenced the generosity of state SCHIP eligibility levels and party politics structured states’ SCHIP implementation (Grogan & Rigby, 2008). Party politics always existed in the policy processes, but it remained below the surface at the time of the enactment of SCHIP at the federal level, during the implementations in states, and again during the SCHIP reauthorization at the federal level. A few studies explored the positions of key players (e.g., politicians, health officials) on the SCHIP expansion and how their partisan politics affected the implementation and reauthorization of the program (Iglehart, 2009; Johnson, DeGraw, Sonosky, Markus, & Rosenbaum, 1997; Pear, 2007). These studies captured the potential coalitions among policy actors based upon their political positions, but they did not attempt to systematically investigate the partisan dynamics of the SCHIP policy process from a policy network approach.

Policy researchers apply policy theories or frameworks to simplify complex policy processes. For example, Sardell and Johnson (1998) analyzed the child healthcare policy process including SCHIP by applying Kingdon’s (1995) multiple streams framework. They directly analyzed the policy processes with Kingdon’s concepts of *policy streams* and *policy window* to explain the politics of child health policy. Lindblom’s (1995) incrementalism has also been a popular approach to understand the SCHIP policy process. Some researchers examined how federal and state incremental policies brought health care reform and how the incremental approach affected institutions and policy options. A group of researchers conceptualized the SCHIP policy
process as a bipartisan, incremental process in which political compromise was the best option facing a large number of policy actors including governors, advocacy groups, members of Congress, health policy officials, and so on (Kronemusch & Elbel, 2004; Oberlander & Lyons, 2009; Weil, 2001).

Since the first introduction of the ACF by Sabatier and Jenkins-Smith (1993), there have been over 100 publications on it in multiple areas such as environmental policy, unclear policy, health policy, and domestic violence (Sabatier & Weible, 2007). There are a few studies that utilized network analysis tools in their applications of ACF. Henry (2011) investigated the role of power and ideology in the formation of policy networks and used the ACF and the resource dependency theory. He found that ideology is an important factor behind network cohesion. Policy elites systematically avoid networking with ideologically dissimilar actors, but collaborative networks are formed among actors with shared beliefs. Ingold (2011) also captures the linkage of network structures and cognitive characteristics of a policy process predicted by the ACF. By utilizing the social network analysis and multi-criteria analysis, he found that in the Swiss Climate Policy case, policy core and secondary aspects were sources of conflict and cooperation within policy subsystems. The structural belief system split the Swiss climate subsystem into a pro-economy coalition, a pro-ecology coalition, and an intermediate group of federal agencies and scientists. This coalition structure seemed to be stable over at least one decade. Leifeld (2013) conducted a discourse network analysis in German pension politics from 1997 to 2001 to examine how major policy change came about. Based on the level of policy preferences, a clear pattern of structural changes could be
observed, from a single hegemonic advocacy coalition, to the emergence of a second advocacy coalition and eventually a strong bipolarization of the subsystem.

However, there are no studies that attempted to apply the ACF to the dynamic SCHIP policy processes. In order to fill this theoretical and empirical research gap, in this dissertation, I investigated the state-level SCHIP policy process in Illinois by applying two theoretical frameworks: the PNT and the ACF. I used the PNT to study the structural characteristics of the SCHIP policy networks longitudinally, with the purpose of tracking their evolution and their impacts on the policy change. By applying the ACF to the Illinois case, I identified the coalitions in the SCHIP policy process and the actors’ beliefs that were attached to the coalitions. This synthesis of the two theoretical approaches is better to understand the multifaceted nature of policy studies (Cairney, 2013).

3. Purpose of the Study

The purpose of this longitudinal case study of the SCHIP policy process in Illinois was to contribute to the academic literature by combining the insights of two theoretical frameworks (the PNT and the ACF) and applying methods that were not used in the studies on policy processes: AutoMap, a computerized textual analysis tool, and ORA, a dynamic network analysis tool. In my study I utilized the basic assumptions and concepts of the policy network theory (PNT) and the advocacy coalition framework (ACF). More specifically I investigated the impacts of the policy network characteristics on the policy outcomes in the Illinois SCHIP case between 1997 and 2007. It is important to understand the characteristics of policy networks in policymaking processes because these networks can help shape the success or failure of a policy initiative (Henry, 2011).
In my study, I used the ACF to investigate the policy coalitions and the role of policy actors’ beliefs over time. The ACF provides a mechanism to discover the relations of policy coalitions with actors’ beliefs and policy preferences in the coalitions. The ACF also provides a lens to see how the actors’ beliefs affect the formation of policy networks and policy change. The PNT is compatible with the ACF’s basic assumptions and network concepts help extend the basic principles of the ACF by clearly defining competing coalitions (Leifeld, 2013; Lubell, Scholz, Berardo, & Robins, 2012).

The research questions I seek to answer are presented in the following section. These questions are based on the concepts and propositions of the advocacy coalition framework (ACF) and the policy network theory (PNT).

In the first phase of my study, I conducted a series of network text analyses and dynamic network analyses. For these analyses I used AutoMap, a computerized textual analysis tool (http://www.casos.cs.cmu.edu/projects/automap), and ORA, a dynamic network analysis tool (http://www.casos.cs.cmu.edu/projects/ora). In order to explore the relationships between policy actors and their beliefs, I conducted a series of cluster analyses in ORA. In the second phase of the study, I reviewed and interpreted the texts to verify and substantiate the findings of the AutoMap and ORA analyses.

4. Research Questions

The three general research questions I aimed to answer in my dissertation research were as follows:
1. What are the characteristics of the policy networks in the SCHIP policy processes in Illinois?

2. What were the characteristics of the individual and organizational actors of these networks?

3. How did the policy network characteristics and their evolutions affect the policy changes in the SCHIP policy processes in Illinois?

The first general question (What are the characteristics of the policy networks in the SCHIP policy processes in Illinois?) was informed by the conceptualizations and predictions of the ACF. The ACF holds that, within policy subsystems, policy actors will tend to cluster into competing policy coalitions and each coalition will be formed around a distinct set of policy viewpoints. According to the ACF, policies are made within policy subsystems and there usually are two competing policy coalitions (networks) in these systems: one pro-policy coalition and one against-policy coalition (Leifeld, 2013; Weible & Sabatier, 2009; Weible, Sabatier, & McQueen, 2009). Significant policy changes within the subsystems occur when the policy actors composing of coalitions change their beliefs and policy positions. The ACF holds that members of advocacy coalitions adhere to hierarchically structured belief systems in which the most basic beliefs (e.g., fundamental ontological and normative axioms) constrain specific or operational beliefs and policy positions (Weible & Sabatier, 2009).

In my research, I explored whether the ACF’s prediction was correct, i.e., whether these two coalitions (networks) existed in the case of the SCHIP in Illinois. I also explored other possible configurations (e.g., issue networks) of network structures in the
Illinois case, because the ACF’s prediction may not be correct or the policy network structures may be different or more complex than its predictions.

To answer the first general question, I formulated a group of specific questions. This group of questions addresses two theoretical possibilities. First, I tested the prediction of the ACF that there are typically two policy coalitions (networks), one pro-policy and one against-policy. Second, I investigated whether there are any other specific networks other than the ones predicted by the ACF. The concepts of the PNT can enrich our understanding of the networks if the ACF is empirically limited to conceptualize them. These questions can be answered using network text analyses and dynamical networks analyses (AutoMap and ORA), as described in the methodology section.

Specific Questions Under First General Question

1-a. Were there two policy coalitions (networks), one pro-policy and one against-policy, in the SCHIP policy processes in Illinois, as predicted by the ACF, or were there different configurations of networks, during the period studied: 1997-2007?

1-b. Once the policy coalitions (networks) are identified in each of the years analyzed (1997-2007), what were the structural characteristics (whole network characteristics) of these networks?

More specific questions under 1-b:

i. What were their network sizes?

ii. What were the degrees of centralization of these networks?

iii. What were their network densities?
iv. Did these network characteristics change over time in the period between 1997 and 2007?

My second general question was: What were the characteristics of the individual and organizational actors of these networks? Under this general question, I asked the following specific questions.

2-a. Who were the central actors in each of the coalitions (networks) and how did these centralities change?

2-b. What were the beliefs (“knowledge” as they are measured in ORA) in each of these coalitions (networks)? Under this question, I asked the following more specific questions.

i. What beliefs were most important (attached to the most central actors and/or most frequently cited in the texts that are analyzed) in these coalitions?

ii. How did these beliefs of network actors change over time?

My third general question was: How did the policy network characteristics and their evolutions affect the policy changes in the SCHIP policy processes in Illinois? After identifying the network structures (Research Question 1) and characterizing the actors and their beliefs and in the SCHIP process (Research Question 2), I explored possible relationships between network structures and policy outcomes (Research Question 3).
The ACF posits that policy coalitions are usually stable over time and that major policy changes occur when coalition members change their beliefs or policy positions. Exogenous shocks and new information are identified as the main drivers of policy change (Sabatier & Jenkin-Smith, 1993). Policy theorists also stress a possible cause and effect relationship between policy networks and policy outcome (Dowding, 1995; Sandström & Carlsson, 2009). The structural elements of a policy network affect its performance and policy outcomes. For example, if the actors of a policy network are heterogeneous, it is more likely that the network will be efficient and innovative in its works (Sandström & Carlsson, 2008). By combining the ACF and the PNT, I explored the relationship between network structure found in the analysis and its effect on policy change in the case of Illinois SCHIP policy process.

The third general question is very important, but it is more difficult to answer analytically, because that would require a more comprehensive research design and extensive data collection, which was not feasible under my conditions. Instead, I attempted to answer it using some inferences from network analyses and text interpretation.

5. Significance of the Study

It is important to study policy network relationships because policy actors are embedded in networks of relationships and public policies are the products of complex interactions among governmental and nongovernment actors, each seeking to influence collectively binding decisions that affect their interests (Knoke & Laumann, 1982). This dissertation is the first study that provides the theoretical and empirical insights into the
network dynamics of the SCHIP authorization and reauthorization process. The contribution of my study is that it integrates the insights of two major theoretical frameworks in policy studies: the ACF and the PNT. The PNT is a useful conceptual approach mapping the network of relations in policy processes, particularly the patterns of interaction among policy actors. The ACF helps investigate the rationale of the network formations and the relation between these network structures and policy changes.

In my analyses I used network text analyses (NTA) and dynamic network analyses (DNA), which enable researchers to study “meta-network” relationships among actors, beliefs, and resources (Diesner & Carley, n.d.). This innovative methodology (the NTA and DNA combination) has been underutilized. Morçöl, Vasavada, and Kim (2011, 2013) used some aspects of it in their studies on an urban governance network. There are not many other applications in the literature. The conceptual combination of the PNT and the ACF, and the application of AutoMap and ORA I propose for my dissertation are unique. Thus this dissertation will make both the theoretical and methodological contributions to the public policy literature.

This dissertation is organized as follows. In Chapter 2, I examine the historical background and contexts of the SCHIP in the both federal and state government levels. In Chapter 3, I address a broad range of academic discussion about policy networks and their linkages with policy theories, particularly the ACF. In Chapter 4, I propose a model of policy networks structure and policy change for this study. In Chapter 5, I describe the methods used in investigating the research questions. In Chapter 6, I present the results of networks analyses and cluster analyses of the SCHIP policy process. In Chapter 7, I summarize the major findings from this study and discuss their theoretical,
methodological, and policy implications with the limitations of the study and suggestions for future research.
CHAPTER 2. A BACKGROUND OF ILLINOIS STATE CHILDREN’S HEALTH INSURANCE PROGRAM (SCHIP)

This chapter provides a historical background to the discussions on the SCHIP in the United States and Illinois. The first section outlines the emergence of the SCHIP at the federal level as the background of the Illinois SCHIP. The next section reviews a historical and political context of the SCHIP development and implementation in Illinois.

1. A Background of SCHIP at the Federal Level

The health policy for children in the U.S. was institutionalized for the first time with the establishment of the Children’s Bureau to promote the welfare of children with special needs in 1912. In 1921, the Maternity and Infancy Protection Act was passed. It was the first federal grant-in-aid program that provided matching funds to states as a way of establishing the principle of public responsibility for children’s health. The role of the federal government was sharply expanded from the New Deal through World War II and the Great Depression. The Social Security Act in 1935 was a landmark in the history of children’s health programs, because it included amendments that required that the federal government help needy families as well as their children (Yarrow, 2009). In the following decades, from the creation of the Emergency Maternity Infant Care program in the 1940s to that of the Maternal and Child Health Services Block Grant in the 1980s, children’s health policies showed incremental changes (van Dyck, 2003; Yarrow, 2009).

During the 1980s, U.S. policymakers responded to the problems of low-income uninsured children by establishing federal mandates to expand children’s Medicaid eligibility. These mandates created eligibility based solely on family income and the age
of a child, independent of family eligibility for other welfare benefits covering all children under age six whose families have incomes below 133% of the federal poverty line and all children with family income below 100% of the poverty line. The result was a large expansion of Medicaid enrollments. From 1991 to the enrollment peak in 1996, the number of children enrolled in Medicaid increased from 16 million to 20.5 million (Brandon, Chaudry, & Sardell, 2001).

The 1993-94 debate on national health care reform brought children’s health issues back into the policy realm. After the failure of President Clinton’s Health Security Plan in 1994, congressional liberals and health activists made children’s health insurance the next incremental step that could be taken to increase health care access in the country. To policymakers, the healthcare coverage for children was a politically salient issue, particularly because the rates of insured children had dropped since 1977 and this drop was especially striking among poor children. Even worse, the overall private insurance coverage had eroded steadily and low-income children were the main victims of this decline (Cunningham & Kirby, 2004). In addition, many polls showed that the majority of Americans supported the efforts to provide health coverage for children (Blendon & Wood, 1998).

At the beginning of the 105th Congress in January 1997, the children’s health insurance was the number one item on the Democrats’ health policy agenda. Diverse alternatives developed at both the federal and state governmental levels. Following the success of the Health Insurance Portability and Accountability Act of 1996, as a bipartisan compromise under the leadership of Senators Nancy Kassebaum (R-KS) and Edward Kennedy (D-MA), the President and congressional leaders advanced a number of
proposals to expand children’s health coverage. These expansions ranged from a Medicare-style entitlement to cover all children who are uninsured to pilot demonstration programs for states to add coverage for a small number of children. In order to give states full discretion, most legislative proposals introduced during the first four months of 1997 defined the mechanisms for establishing state-administered programs to enroll uninsured children in private health insurance. These programs included tax credits, voucher plans, or block grants to the states (Johnson, DeGraw, Sonosky, Markus, & Rosenbaum, 1997).

In the major proposals introduced to Congress, the policy maker’s debates narrowed to two major alternatives: a coverage expansion for children within Medicaid, and a state block-grant proposal. Policy coalitions for the policy alternatives of SCHIP emerged along the two major proposals. While there was bipartisan support for the principle of expanding coverage for uninsured children, the debate over the policy-design alternatives represented a clear partisan split between Democrats supporting a Medicaid expansion and Republicans supporting a separate block-grant program (Grogan & Rigby, 2008).

One important policy coalition supporting Medicaid was initiated by Senator Edward Kennedy (D-MA) and Senator Orrin Hatch (R-UT). Most members of Democrats and later anti-tobacco groups joined in the coalition. Senator Kennedy introduced the first bill to provide health care coverage for children of the working poor, to be financed via a 75 cents a pack cigarette tax increase in October 1996. President Clinton espoused the goal of expanding coverage for children in his 1997 State of the Union address. In March, Senator Hatch became a co-sponsor of the legislation (Grogan & Rigby, 2008). The Kennedy/Hatch bill stated that SCHIP is partially financed by a tax on tobacco products.
The Children’s Defense Fund participated in the coalition supporting the Kennedy/Hatch bill. The coalition, which included anti-tobacco groups such as the American Cancer Society, emphasized the message that cigarette companies that advertised to young people were evil and that health care for children was good (Rosenbaum, Johnson, Sonosky, Markus, & DeGraw, 1998).

The major issue in the SCHIP enactment was to either expand Medicaid eligibility beyond federally mandated levels or to establish state-funded children’s insurance programs. It was in the context of this evolution that Senator Kennedy joined with Senator Hatch in introducing a bill that provided federal grants to the states to help families purchase health insurance. The Kennedy and Hatch coalition was formed because both had long histories of activism in health and children’s issues. Even though ideological differences existed between Democrats and Republicans, the conflict was negotiated and ultimately solved. Senators Kennedy and Hatch pushed their children’s health insurance proposal to the center of policy consideration and then worked in alliance with a grassroots coalition to give it national attention. According to the bill, states would contribute 40% of their shares of Medicaid to the funding and the federal portion of the program’s funding would be financed by a 43 cent increase in the tax on tobacco products (Brandon, Chaudry, & Sardell, 2001).

Another policy coalition was composed of most Congressional Republicans and the representatives of the National Governors Association (NGA). The initiators, Senator Chafee (R-RI) and Senator Rockefeller IV (D-WV), were concerned about preserving individual entitlements to health insurance. They therefore joined in introducing a bill into the Senate that provided an enhanced federal matching grant to states that expanded
Medicaid coverage for certain groups of pregnant women and children. The debate over the state autonomy continued as a main theme throughout the SCHIP enactment process. Representatives of the NGA argued the case for “flexibility” in state actions. The NGA played a key role as a part of the intergovernmental lobby in the process of crafting SCHIP. Since the enactment of Medicaid in 1965, health financing has been one of the top priority issues for the NGA. A policy window opportunity opened for the NGA in 1994 through the shift of control of Congress to the Republican Party (Sardell & Johnson, 1998). The NGA could enjoy support of the Republican-controlled Congress and pushed the proposal for a large new state block grant program. In this respect, the SCHIP policy process continued the NGA’s opposition to federal Medicaid mandates, which had been the driving force behind the 1995-1996 effort to make SCHIP a block grant (Sardell & Johnson, 1998).

While the Senate bill was the result of a policy compromise, the House enacted a bill based on the NGA political position. The House bill required only basic services in its benefit package, but it also exempted group plans from these requirements if the children in a state’s CHIP program received the same benefits as other children covered by the plan (Rosenbaum et al., 1998). Governors were very active during the deliberations of the House-Senate Conference Committee. Not surprisingly, the benefits required by the SCHIP legislation gave states greater flexibility than they had in the Senate bill.

Negotiations between two policy coalitions brought states the options to extend coverage to uninsured children under the SCHIP law in 1997. There were three options for implementing SCHIP: (1) using Medicaid, (2) creating an entirely new program, or
(3) combining both (Grogan & Rigby, 2008). The final legislation was an attempt to blend all of these issues and concerns into one program; the result was an unusual statute that was far more complex than it first appeared to be (Anderson, 2003). The new federal legislation was the success of those who wished to ensure that great flexibility could be exercised at the state level in designing and implementing legislation establishing SCHIP in each jurisdiction.

In 1997, a new State Children’s Health Insurance Program (SCHIP) was enacted and it was the largest single commitment to coverage for children since the enactment of Medicaid in 1965. Codified as Title XXI of the Social Security Act, SCHIP is a federal grant-in-aid program that entitles states that elect to participate to federal allotments to provide “child health assistance” to “targeted low income children” who are ineligible for other insurance coverage, including Medicaid. Over the next 5 years, $24 billion was authorized for use by states to expand Medicaid or otherwise provide coverage to children whose family income is below 200% of the federal poverty level (Sardell & Johnson, 1998). Unlike Medicaid, which is an entitlement to individual children, SCHIP was created as an entitlement to states. In addition, states were given enormous flexibility, particularly in defining benefits. SCHIP allows states to cover targeted low-income children whose families’ incomes are above the Medicaid eligibility levels. The SCHIP is a federally mandated, state administered program similar in nature to Medicaid, Medicare, and other social welfare programs in the U.S., but is structured as a categorical grant to the states rather than as an individual entitlement. Categorical grants are “grants that must be used for particular – very often, quite narrow – objectives as specified by the donor and agreed to by the recipient. In the U.S., “most federal grant programs are of this
kind” (Salamon, 2002, p. 343). The responsibility for design, implementation, and administration of the program rests solidly on the states. States may choose from among three benefit options when designing their SCHIP programs. They may enroll targeted low-income children in Medicaid, create a new separate state program, or devise a combination of both approaches (Congressional Budget Office [CBO], 2007).

Since the enactment of the Balanced Budget Act in 1997, SCHIP has played a major role in expanding the insurance coverage to children. According to SCHIP, states could choose to expand their Medicaid programs, thus affording SCHIP-eligible children the same benefits and services that are provided by the state Medicaid program. Alternatively, states could construct a separate children’s health program from Medicaid with specified public or private insurance plans offering a minimum benefit package. The 50 states have implemented the program differently, based on their differences in institutional arrangements and in their demographic and social makeups. Some 23 states that had already implemented Medicaid were more likely to expand it. Another 15 states preferred to start new programs, and 18 both expanded Medicaid and set up a new SCHIP program (Weissert & Weissert, 2006).

SCHIP was adopted to address the gap in health insurance coverage for low-income children who were not poor enough to qualify for Medicaid. Following the enactment of the law in 1997, the enrollments in SCHIP increased rapidly during the first five years, from 1998 through 2002 (Figure 2.1). During the first two years of implementation, states with the largest percentages of low-income uninsured children increased their income eligibility thresholds to a greater degree than those states with smaller percentages of uninsured children (Cunningham & Kirby, 2004). In the fiscal
year 2007, the total number of children enrolled in SCHIP increased by 4,412,000 (Figure 2.1). Together with Medicaid, SCHIP provides a critical safety net for poor and near-poor children. SCHIP administered as Medicaid expansions has been more successful than either separate SCHIP plans or combination plans in enrolling children. The SCHIP program has also been credited with producing considerable cost saving over the long term (Kronebusch & Elbel, 2004). Consequently, SCHIP has been successful in reducing the number of uninsured children.

Despite these successes, the implementation of SCHIP was challenged by budgetary problems that most state governments faced from 2003 to 2006. The state governments faced the challenge of the mismatch between program needs and federal funding subject to annual caps and state allocations. Due to the economic downturn and program cutbacks, growth slowed and enrollment decreased in 2004. As the growth in

![U.S. SCHIP Enrollment of Children June 1998 - 2007](image.png)

*Figure 2.1. SCHIP Enrollment Growth, KCMU (2008).*
SCHIP enrollment along with rising health care costs contributed to states’ budgetary pressures, more states reduced or eliminated strategies to encourage enrollment (Cunningham & Kirby, 2004).

The second challenge was President Bush’s refusal to reauthorize SCHIP. SCHIP’s original federal funding authorization was set to expire on September 30, 2007. In the 2006 elections, Democrats gained majorities in both the House of Representatives and the Senate for the first time since 1994, and the Democratic leadership identified SCHIP reauthorization as a legislative priority. Democrats wanted to expand SCHIP to cover more children and their proposal was backed by key Republicans, including Senators Hatch and Chuck Grassley. A broad coalition of interest groups – including Families USA, America’s Health Insurance Plans (AHIP), the American Medical Association (AMA), Pharmaceutical Research and Manufacturers of America (PhRMA), and the Federation of American Hospitals (FAH), and many state governors – endorsed the expansion of SCHIP.

In August 2007, both the House and Senate passed laws to renew and extend SCHIP. The House bill, which called for spending 50 billion over five years, passed with only five Republicans voting in favor and ten Democrats voting against the bill. A day later, with a significant Republicans support, including Orrin Hatch (R-UT) and Charles Grassley (D-IA), the Senate voted to increase SCHIP spending by $35 billion over five years. To pay for this, both bills would increase the tobacco tax, and the House bill would also reduce payments to Medicare Advantage plans. Both bills provided incentives for states to expand coverage. Specifically, the House bill included the fact that states
covering children to 300% of the FPL (Federal Poverty Line) would receive an enhanced match (Iglehart, 2007; Oberlander & Lyons, 2009).

Despite optimistic expectation for SCHIP reauthorization, President Bush vetoed both the House and the Senate bills. In August 2007, he imposed new regulations making it more difficult for states to expand coverage to children in middle-income families. Bush’s 2008 budget proposed the addition of only $4.8 billion over the next 5 years. The amount would fall well short of the monies needed to maintain the existing SCHIP programs (Oberlander & Lyons, 2009).

How can this opposition to SCHIP reauthorization be explained? One major reason was that the reauthorization of SCHIP at a substantially higher level of spending would “crowd out” private insurance in favor of public coverage and lead down a path to socialized medicine (Gorin & Moniz, 2007). As Mike Leavitt, secretary of Health and Human Services, pointed out, the House and Senate bills would include a crowding-out problem by “shifting millions of people” with “good incomes and private insurance to publicly assisted government insurance” (as cited in Gorin & Moniz, 2007, p. 244). According to Leavitt, SCHIP should remain a program for low-income children.

Facing the budgetary shortfalls at the federal government, President Bush declined to support the SCHIP reauthorization in 2007. One reason for his position was that federal funds to support states’ SCHIP programs would be inadequate in the coming years (Kenney, 2008). However, the Bush Administration’s real objection to the House and Senate bills may be philosophical and ideological. The president’s party argued that government-funded SCHIP should be a narrowly targeted means-tested program for poor uninsured children, whereas the Democrats argued that SCHIP should continue to ideally
guarantee that all children have some type of health care coverage (Grogan & Rigby, 2008). Following the President’s veto of bipartisan expansions of SCHIP in 2007, a temporary reauthorization of SCHIP was passed in 2007 to extend the program through April 2009. The extension fell short of the comprehensive SCHIP reauthorization efforts which would have significantly increased funding and coverage of low-income children. After more than two years of debate, the Children’s Health Insurance Program Reauthorization Act (CHIPRA) was passed by the 111th Congress and signed by President Obama. The Act expands funding for children’s coverage by $33 billion in federal funds over the next four and half years (The Kaiser Commission on Medicaid and the Uninsured [KCMU], 2009). The SCHIP reauthorization debate centered on the differences between the philosophies of government-run health care and organized private health care markets. SCHIP can be considered government-run health care only in the narrowest sense – after all, most recipients belong to private plans and receive care from physicians in private practice (Gorin & Moniz, 2007; Kenney, 2008; Monheit, 2008).

In sum, I reviewed children health as a national policy issue from authorization and reauthorization at the federal government level. In 1997, the children health issue was revitalized with the enactment of a strengthened federal mandate, which the states implemented in various ways. A small piece of the national health reform debate of 1993-94 was devoted to the benefits of children’s health. In the following years, efforts to reform Medicaid and to expand children’s health insurance coverage brought the politics of SCHIP among policy actors from both federal and state levels. In the following section, I review the history and policy contexts of the SCHIP in the case of Illinois.
2. History and Policy Context of the SCHIP in Illinois

Historically the state of Illinois did not boldly pursue health reform initiatives or coverage expansions. As of 2002, Illinois covered parents only up to approximately 39 percent of FPL, ranking 39th among states in coverage of this population (Coughlin & Cohen, 2007). The federal SCHIP legislation in 1997 provided the incentive to address the issue of children’s healthcare coverage in Illinois. The debates in the state centered on how to spend the SCHIP funds and the extent to which the program should model private insurance or Medicaid. Most of the Republican members were in favor of creating a separate program because they felt that cost sharing was essential to foster personal responsibility for healthcare coverage and were against expanding Medicaid. However, many Democratic legislators and children’s advocates were in favor of a Medicaid expansion that would extend coverage to families with incomes up to 200% of poverty. At the end a compromise was reached, and Illinois created three separate Medicaid look-alike programs in 1998:

(a) KidCare Share, providing Medicaid-equivalent benefits with copayment requirements to children through age 18 in families with incomes from 134% to 150% of the FPL;
(b) KidCare Premium, providing Medicaid-equivalent benefits with premium and copayment requirements to children through age 18 in families with incomes from 151% to 185% of the FPL; and
(c) KidCare Rebate, an entirely state-funded benefit reimbursing families for all
or part of the cost of private or employer-sponsored health insurance coverage up
to a maximum of $75 per child per month for children through age 18 in families
with incomes from 134% to 185% of the FPL.

Table 2.1 shows the KidCare and FamilyCare program components as they
existed in 1998 and tracks program enhancements and expansions through June 2006.
The compromise to accept the 185% of poverty level satisfied those who feared that
extending eligibility to 200% of poverty might financially strain the state (Coughlin &
Table 2.1. *Overview of Illinois Medicaid and SCHIP Program Changes*  

<table>
<thead>
<tr>
<th>Year</th>
<th>Key Development</th>
<th>Program Components</th>
</tr>
</thead>
</table>
| 1998 | KidCare Program Established | KidCare Assist (Base Medicaid and M-SCHIP)  
KidCare Share (Separate SCHIP)  
KidCare Premium (Separate SCHIP)  
KidCare Rebate (State-funded)  
KidCare Moms & Babies (M-SCHIP)  
FamilyCare Assist |
| 2002 | KidCare Enhanced; FamilyCare Expanded | KidCare Share  
KidCare Premium  
KidCare Rebate  
FamilyCare Assist |
| 2003 | KidCare and FamilyCare Expanded | KidCare Premium  
KidCare Moms & Babies  
FamilyCare Assist |
| 2004 | KidCare Rebate and FamilyCare Expanded | KidCare Rebate  
FamilyCare Assist |
| 2005 | All Kids Enacted; All Kids Pre-Enrollment Begins | |
| 2006 | All Kids and FamilyCare Share, Premium and Rebate Implemented | All Kids Assist  
All Kids Share  
All Kids Premium Level 1/Level 2-8  
All Kids Rebate  
Moms & Babies  
FamilyCare Assist  
FamilyCare Share  
FamilyCare Premium  
FamilyCare Rebate |

Source: Gifford, Morgan, Marks, & Trenholm (2008, p. 6).

Illinois covered children whose family incomes were from 134 percent up to 185 percent above the poverty line in what was then called KidCare (the state’s SCHIP
Because of limited marketing and outreach, the enrollment in this program was low. In 1999, fewer than 30,000 children were enrolled in KidCare. Reflecting its lower than average coverage under Medicaid and limited enrollment in SCHIP, Illinois’ uninsured rate among non-elderly individuals with incomes below 100 percent of the FPL was higher than the national average in 2002 (Coughlin & Cohen, 2007).

Under the leadership of Governor George Ryan (R), Illinois implemented a Medicaid/SCHIP Section 1115 Health Insurance and Flexibility and Accountability (HIFA) waiver1 in 2002, which allowed the state to aggressively expand insurance eligibility to parents and other caretaker relatives with incomes up to 185% of the FPL. The HIFA waiver also enabled Illinois to obtain federal Medicaid and SCHIP matching grants for those children enrolled in its state-funded premium assistance program, KidCare Rebate (Gifford, Morgan, Marks & Trenholm, 2008; Joseph, 2007). Although the Illinois’ SCHIP was considered a Medicaid “look-alike” program in terms of benefits and service delivery, the components of KidCare reflected a strong desire by many Republican policymakers for SCHIP to model private insurance (Lutzky & Kapustka, 2005).

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1 In 2001, the U.S. Department of Health and Human Services (HHS) approved new section 1115 waiver of the Health Insurance Flexibility and Accountability Initiative (HIFA). Under the new section 1115 waiver, states are allowed to have broad authority to restructure their Medicaid and SCHIP programs, including limiting enrollment, modifying benefit structures, and increasing beneficiaries’ cost sharing (Coughlin, Long, Graves, & Yemane, 2006; KCMU, 2003).
The former Governor Blagojevich (D), who was elected in November 2002, continued to support the HIFA waiver by making funding available for the phased-in coverage expansion for parents. In January 2006, the coverage expansion of parents with incomes up to 185% of poverty was completed. Also during this time, Illinois broadened coverage to children by raising eligibility levels from 185 to 200% of the FPL for both KidCare SCHIP under the state plan and KidCare Rebate under its HIFA waiver in 2004. With particularly the strong leadership of Governor Blagojevich and the widespread support from state advocacy groups, health care stakeholders and the legislature, a new legislation was passed in July 2006. The law established the “All Kids” program, the nation’s first universal coverage program for children. All Kids is a collection of programs including both the state’s Medicaid and SCHIP program, which cover eligible children in families with incomes up to 200% of the FPL. All Kids was made available to all uninsured children without regard to income, health status or citizenship (Coughlin & Cohen, 2007).

Despite the widespread support for All Kids, there were some doubts and concerns about the intended purpose of the program. During the debate in the legislature some policymakers were concerned that since All Kids would cover all children, including undocumented children, the state may become a magnet for this population. In addition, there was a concern about the program’s financial sustainability. When Governor Blagojevich took office in January 2003, the state was facing many fiscal challenges due to the national economic downturn that began in 2001 and resulted in state budget deficits (Coughlin & Cohen, 2007; Joseph, 2007).
These major SCHIP developments in Illinois (the legislation authorizing the program in 1997, the creation of All Kids program, and the reauthorization in 2007 at the federal level) framed my analyses in this study. Table 2.2 summarizes the key developments in Illinois. I set the year 1997 as the beginning date for my study because the SCHIP was enacted in this year. I examined the first 11 years of the SCHIP program, until its reauthorization in 2007, because the interests in the SCHIP among policymakers and other stakeholders decreased after then. Thus, the year 2007 would be the logical end of the time for my study. Also, the history of SCHIP during this time period was long enough to observe some trends over time and to observe the structural characteristics of policy networks through the SCHIP authorization and reauthorization processes.

Table 2.2. Key Developments of SCHIP in Illinois

<table>
<thead>
<tr>
<th>Year</th>
<th>Key Developments</th>
<th>Level</th>
</tr>
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<tbody>
<tr>
<td>1997</td>
<td>SCHIP was enacted as part of the Balanced Budget Act</td>
<td>Federal</td>
</tr>
<tr>
<td></td>
<td>The Children’s Health Insurance Program Act (CHIPA) House Bill 705 was signed</td>
<td></td>
</tr>
<tr>
<td>1998</td>
<td>Under the federal Section 1115 waiver, SCHIP funds are used to expand its coverage</td>
<td>State</td>
</tr>
<tr>
<td>2002</td>
<td>The Covering All Kids Health Insurance Act was passed</td>
<td></td>
</tr>
<tr>
<td>2005</td>
<td>Implementation of “All Kids”</td>
<td></td>
</tr>
<tr>
<td>2006</td>
<td>SCHIP was reauthorized</td>
<td>Federal</td>
</tr>
</tbody>
</table>

As the description above shows, Illinois experienced the success of SCHIP by achieving the universal coverage program for children in a relatively short time period. The key legislative developments reflect the complexity of policy processes, which
involve a large number of stakeholders with conflicting interests and diverse preferences in complex relationships in the case of Illinois SCHIP. Actors including governmental agencies, nonprofit organizations, and other stakeholders in a policy process interact via-s-vis the policymaking process, and this pattern of relations can be mapped as policy networks.

The Illinois SCHIP policy process is of particular value to researchers studying long-term policy change for three reasons. First, the policy process has been in progress for over a decade, and during this time period a relatively consistent set of policy actors has remained active. The history of SCHIP is long enough to see some trends over time and to examine the effects of policy conflicts over nearly a decade of observation.

Second, the debate over the SCHIP implementation was subject to intense political conflict with the fundamental values and policy positions that competing advocacy coalitions have. It is also important to note that policy conflicts existed between federal and state governments in the SCHIP policy processes. SCHIP is a federal formula grant program that gives states three options for providing public health insurance to targeted children: designing a separate SCHIP program; expanding the Medicaid program within a state; or a combination of both strategies. Though the structure of this program provides a great deal of flexibility to the states, the federal intent to affect the spending and policy practices of the states and sometimes the federal funds are regarded to come with coercive, regulatory nature of intergovernmental arrangements (Brandon, Chaudry, & Sardell, 2001).

The federal-state policy conflict was apparent at the time of reauthorization year of SCHIP. States showed unwillingness to allocate additional funding at the state level
without continued federal matching funds (Wolf, 2007). In addition, the political rhetoric of federal-state conflict surrounding the President Bush’s veto of SCHIP renewal legislation provides a strong case of the policy conflict across legislative units. For example, in policy areas related to SCHIP, states were accused of diverting federal funds to projects of higher priority to the states (Nicholson-Crotty, 2004; Government Accountability Office [GAO], 2007). States may use federal funds to replace their own funds, providing the slack necessary to accomplish goals unrelated to the federal grant. These types of fund diverting behaviors have been observed in other welfare programs such as Medicaid (GAO, 2007).

Third, since 1997 the SCHIP policy process has been subject to a number of well-defined exogenous events: changes in presidential administrations, gubernatorial elections, and major health policy changes. The ACF argues that policy change can occur in response to external events or from policy-oriented learning (Sabatier & Jenkins-Smith, 1993). Thus, the case of a SCHIP policy process provides an opportunity to examine how the external events affect the policy changes and the policy actors’ political positions, and how the composition of coalitions affects the policy change.

In sum, I examined the Illinois SCHIP policy process in order to explore the process of formulating a health policy and how a large number of actors with diverse interests and resources develop policy networks to propose a viable solution to the problems they face. The policy context of intergovernmental programs like SCHIP is layered and complex, and multiple frameworks often can be applied (Agranoff & McGuire, 2001). Within this context of SCHIP, I investigated whether the policy process of the SCHIP (re)authorization in Illinois was compatible with the predictions of the
advocacy coalition framework (ACF) and policy network theory (PNT). The following chapter discusses the theoretical frameworks of policy network theories and the advocacy coalition framework, with the purpose of developing a model of policy networks structure and policy change for this study.
CHAPTER 3. THEORETICAL FRAMEWORK OF THE STUDY

In this chapter, I review the literature relevant to the research questions guiding this study. I first examine the policy networks literature. More specifically, I trace the historical developments of policy network theories and address the discussions and applications of the network approach in the fields of public administration and public policy. Next I (a) examine the theoretical model of the advocacy coalition framework (ACF) that I applied in this study, (b) provide a discussion of the linkage of issue networks and the advocacy coalition framework (ACF), and (c) address the resource dependence theory (RDT) from a network approach.

1. Theoretical Explanations of Policy Networks

A. A Historical Background of Policy Network Theories

The concept of policy networks has gained its popularity among researchers in the public administration and public policy arenas. The discussion on policy networks began with a long debate between the pluralist theories and the elite theories in the literature on policymaking processes. In the elite theories, there are a limited number of non-competitive and hierarchically structured groups who influence policymaking or decision-making processes (Schmitter, 1974). Pluralists questioned this assumption. For example, Polsby (1963) and Dahl (1961) insisted that power is more widely shared and diffused than the elite theory indicates. Although the number of people involved in any important decision within the community was rather small, power is diffuse and few political actors exercise power on all issues of the policymaking process (Dahl, 1961).
The pluralist approach sees the political system as reasonably open to multiple interests of diverse groups who exercise influences on decisions. The elite theory holds that unequal power distribution is a permanent aspect of any social structure. Pluralists assert that power may be tied to issues, and issues can be fleeting or persistent, provoking coalitions among interest groups and citizens ranging in their duration from momentary to semi-permanent (Polsby, 1963).

The policy network approach has been influenced by pluralism. Pluralism and the policy network conceptualizations are not directly related, but they share the assumption that there are many groups competing with one another for influence over policy. Pluralism fails to provide a realistic picture of the relations between government and interest groups. The pluralist approach only puts an emphasis on a broader, macro-level question about the distribution of power between the state and civil society, ignoring the relative power relations among governments and interest groups in policy decisions (Rhodes, 1997). According to Rhodes, the policy network approach successfully captures the nature of policy processes by linking the macro-level of power relationships to the micro-level of interpersonal relations. Rhodes defines the policy network approach as a meso-level concept in understanding various relations between government and actors in policy areas.

In the literature of policy networks, the term *policy network* is used as the generic term encompassing all types of networks (Rhodes & Marsh, 1992). Policy networks are defined as networks of organizations and individual actors that are involved in public policymaking and/or implementation. The important contributions to the development in the conceptualization of policy networks came from three distinct bodies of scholarly
discussions: (a) the American literature on policy networks; (b) the British literature on policy networks; and (c) the Continental European literature on policy networks.

The idea of policy networks came into the American literature in the 1950s and 1960s. As Rhodes (1997) points out, the roots of the idea of policy networks began with the influence of American pluralism on the literature on subgovernments (Rhodes, 1997, 2006). The existence of subgovernments has been noted and documented in a number of the American government studies (Freeman & Steven, 1987; Rhodes, 2006). The term subgovernment was first used by Cater (1964). Cater used the term to describe subgovernments in the Capital within the context of defense policy, explaining the direct involvement of private interests in the governing process. Subgovernments refer to clusters of individuals, specifically some groups of legislative members, members of congressional staffs, bureaucrats, and representatives of private groups in a given substantive area of policy. Cater’s (1964) discussion is meaningful as he first described the political phenomenon of the emergence of some groupings – which can be understood later as networks or coalitions – in a policy process (Freeman & Stevens, 1987).

The fragmentation tendency in the U.S. government intensified as a result of the sub-committee revolution in the U.S. Congress in the 1970s. In these years about 240 sub-committees were formed; in comparison, other were 35 sub-committees in the 1950s and 1960s (Jordan, 1990).

The idea of subgovernment was developed as Freeman (1965) disaggregated the policymaking process to subsystems in which Congressmen, bureaucrats and interest groups interacted. Freeman and Stevens (1987) placed a primary emphasis on members, institutions and organizations in various parts of the larger political system from which
they came. Freeman (1965) discussed the relations among executive bureaus, Congressional committees, and interest groups and called them the “web of relationships in the subsystem” (p. 69). Freeman looked at patterns of policymaking within these subsystems. He asserted that Congress and the Administration were organized through sub-units, and, thus, all decision-makings in public policy are made in the subsystem politics. According to Freeman (1965), a subsystem is defined as “the pattern of interactions of participants, or actors, involved in making decisions in a special area of public policy…is found in an immediate setting formed by an executive bureau and congressional committees, with special interest groups intimately attached” (p. 11). Later Ripley and Franklin (1980) developed the notion subgovernments as “clusters of individuals that effectively make most of the routine decisions in a given substantive area of policy” (p. 8). In understanding the subsystem or subgovernment phenomenon, Ripley and Franklin (1980) mentioned members of the House and/or Senate, members of Congressional staffs, bureaucrats and representatives of private organizations as typical actors of subgovernment.

Particular attention was paid by the researchers to their triangular nature of the links among the Congressional Committees, central government agencies, and interest groups. This attention brought the best-known label in the American subgovernment/subsystem literature, the iron triangles (Freemand & Stevens, 1987).

A key figure in the policy networks literature, Heclo (1978), criticized the iron triangles literature, which suggested that the American policy process was subject to the dynastic rule of the iron triangles of mutually supportive legislators, bureaucrats, and interest groups. Heclo argued that policy processes were actually influenced by a diverse
collection of stakeholders who were grouped into “issue networks,” not the closed circle of iron triangles of legislators, bureaucrats, and interest groups. The notion of issue networks came from Heclo’s observation of relationships in subgovernments and/or subsystems in the U.S. political system. According to Heclo, the concept of iron triangle is a distorted view of the actual workings of subgovernments and/or subsystems.

Heclo (1978) defined issue networks as networks of government authorities, legislators, businessmen, interest groups, academics, and journalists in policy areas. Since he extended the concept to the various and numerous actors who are involved in policy processes, Heclo’s issue network has been popular among public administration and policy scholars to understand a wide variety of policy contexts unlike the notions iron triangle or subgovernment offer (Freeman & Stevens, 1987). The concept issue networks is important in understanding the development of policy network discussion as the terms of policy networks and issue networks share some common thread in certain respects. Both begin with primarily subsystems which are characterized as their flexibility, common interests among network members facing common problems, and cross-institutional communication (Jordan, 1990).

Some policy network theorists have stressed the influence of the American political science literature, such as Heclo’s (1978) writings, on the development of the British literature on policy networks (Rhodes, 1997). However, Rhodes (1997) argues that the American policy network concept is not directly applicable in Britain, where the legislature plays a major role in policymaking.

The interest in policy networks grew in the 1970s in Britain. According to Richardson and Jordan (1979), in the British system “ongoing problems and constraints
force successive governments into very similar policy positions. Problems are handled similarly irrespective of what government is in power. Agreement will be sought within the community of groups involved. The central point is that policymaking is fragmented into subsystems, and that the main boundaries are between subsystems rather than between the component units of the subsystem” (pp. 43-44). Within this context, there was a development of exchange relationships in which policymakers in both government and interest groups share an interest and avoid sudden policy change. Each policy sector contained several policy communities (Jordan & Richardson, 1982). These policy communities are characterized as the key to understanding the main feature of the British system.

Heclo and Wildavsky (1974) defined the notion of community in the public policy as “the personal relationships between major political and administrative actors – sometimes in conflict, often in agreement, but always in touch and operating within a shared framework. Community is the cohesive and orienting bond underlying any particular issue” (1974, p. xv). Jordan (1990) argues that the notion of the British policy community is an extension of Heclo and Wildavsky (1974)’s observation of the community. Jordan (1990) describes the British political systems as the arena in which policymaking is fragmented into subsystems and policy agreements are sought between subsystems rather than between the component units within the subsystem. The subsystems are composed of a diverse set of organized groups that are, occasionally, open to unrecognized groups or the general public. While working together, policy actors in both government agencies and interest groups share interests and learn what kind of policy changes are feasible and what would be avoided not to discomfit other policy
members in the subsystem. Policy communities emerge where policy actors in the subsystem begin to communicate each other and debate in the same language and common norms for their dialogue (Richardson & Jordan, 1979).

Marsh and Rhodes (1992) provide a major policy network perspective in analyzing the British policymaking process. The term policy networks was developed by British scholars, not Americans who prefer to use the term subgovernment (Rhodes, 2006). According to Marsh and Rhodes, while there are policy networks in which particular actors enjoy privileged access and influence, policy networks also open up the policy sources to a range of diverse actors. This means that no one or groups of actors dominates the entire policy process or even broad areas of policymaking. Both governmental and nongovernmental sectors in the policy process are highly disaggregated and fragmented, as their interests are more likely to be institutionalized and organized. Policies are made within numerous policy networks in which there are close relationships between different sections of government and different interest groups. Marsh and Rhodes define these actors as policy communities and described the features as follows.

A policy community is viewed as having the following characteristics: a limited number of participants with some groups consciously excluded; a dominant economic or professional interest; frequent interaction between all members of the community on all matters related to the policy issues; consistency in values and broad preferences shared by all participants; exchange relationships with all members of the policy community having some resources; bargaining between
members with resources; and the hierarchical distribution of resources within the participating organizations so that leaders can guarantee the compliance of their members. There is a balance of power, not necessarily one in which all members see themselves as involved in a positive sum game (p. 186).

In his in-depth discussion on the British policy networks, Rhodes (1985) defines policy communities as “networks characterized by stability of relationships, continuity of restricted membership, vertical interdependence based on shared service delivery responsibilities, and insulation from other networks and invariably to the general public (including Parliament)” (Rhodes, 1985, p. 15). In this sense, a policy community is a particular type of policy setting in which policy resolution is made easier because of the long-term relationship and shared norms among the community.

The perspective of policy community that Marsh and Rhodes introduced was extended by Smith (1993). According to Smith, a policy community has a core and a periphery. Core actors control membership, set the rules of the game, and set the major policy directions of the community. They are continuously involved in the day-to-day activities of the policy community. In contrast, peripheral actors abide by the rules of the game but lack resources to be continuously influencing policy. Smith provides a description of policy communities:

In a policy community there are a limited number of groups which are stable over time and agree on the parameters of policy. They have resources to exchange which results in a process of policy-making that is based on negotiation and
presumes that once an agreement is reached a pressure group can ensure that the membership will abide by the decision. A policy community involves the conscious and unconscious exclusion of particular groups. Groups are excluded through conscious decisions not to involve a particular group. They are also excluded through ideologies, rules of the game and the structure of policy making (1993, p. 61).

Scholars like Marsh and Rhodes (1992) and Smith (1993) agree that the U.S. political system is particularly prone to the development of issue networks, while policy communities provide advantages in understanding the British government system. They observe that in the U.S. political system, ease of access and the large number of decision-making points makes it difficult to reach consensus. Additionally, the power of Congress tends to polarize issue in the U.S. more so than in Britain, and this inhibits the development of consensus on policy problems in the U.S.

Another important contribution to the development of the policy network approach came from the Continental European literature. This tradition puts its emphasis on the horizontal interaction and bargaining found in a policy network, along with the decentralization of capacities for collective action. According to Marin and Mayntz (1991), a perspective on policy networks in the Continental literature draws attention to “the collective action of organized corporate actors, and consequently to interorganizational relations in public policymaking” (p. 14). The British and American policy network literatures mainly focuses on the interest intermediation relations that see policy networks as a generic term for different forms of relationships between interest
groups and the state. Continental scholars, such as Marin and Mayntz (1991), draws attention to networks composed mainly or exclusively of public actors as in the case of intergovernmental relations. In the Continent European literature, the concept of policy network refers to “any pattern of interrelationships among people, organizations, events, or other attributes. A network exists when points are directly or indirectly linked to other points in a pattern” (Schneider, 1992, p. 110). Schneider argues that a policy emerges not from centrally concentrated or programmed action but from autonomous interactions among interdependent individuals or organizations. In this Continental perspective, policy networks are regarded as a specific form of governance, a mechanism to mobilize political resources in situations where resources are widely dispersed between public and private actors (Borzel, 1997).

The view of policy networks as a specific form of governance is most explicit in the works of some German public policy scholars like Renate Mayntz, Fritz Scharpf, Patirick Kenis, and Volker Schneider called the Max-Plank-School. They start from the assumption that modern societies are characterized by functional differentiation and partly autonomous societal subsystems (Kenis and Schneider, 1991; Mayntz, 1994). Under the conditions of environmental uncertainty and increasing international, sectorial and functional overlap of societal subsystems, policy networks as a mode of governance dispose of a crucial advantage over the two conventional forms of governance, hierarchy and market (Borzel, 1997). Marin and Mayntz (1991) interpret policy networks as a form of network between market and hierarchy consisting of “autonomous but interdependent actors, with divergent and mutually contingent interest” (p. 18).
Kenis and Schneider (1991) discuss the changes in government and society that have led to the development of policy networks as an institutional innovation. Both social organization and governance are increasingly decentralized. Consequently, a central government actor cannot control society and government. Rather, controlling mechanisms and information are dispersed among a multiplicity of actors. Coordination of the actors involved in governance can no longer be directed by a central actor “but emerges through the purposeful interactions of individual actors, who themselves are enabled for parallel action by exchanging information and other relevant resources” (p.26). Because of decentralization, public policy is increasingly made “in informal political infrastructures outside conventional channels such as legislative and administrative organizations” (p. 27). Kenis and Schneider provide a critical point to their understanding of policy networks:

Policy networks are new forms of political governance which reflect a changed relationship between state and society. Their emergence is a result of the dominance of organized actors in policymaking, the overcrowded participation, the fragmentation of the state, the blurring of boundaries between the public and private, etc. Policy networks typically deal with policy problems, which involve complex political, economic and technical task and resource interdependencies and therefore presuppose a significant amount of expertise and other specialized and dispersed policy resources (p. 42).
In their argument, policy networks are mechanisms that the capacity for decision-making, policy formulation and implementation is widely distributed among public private actors. Policy networks are understood as “webs of relatively stable and ongoing relationships which mobilize and pool dispersed resources so that collective (or parallel) action can be orchestrated toward the solution of a common policy (Kenis & Schneider, 1991, p. 36). They are characterized by predominantly informal interactions between public and private actors with distinct, but interdependent interests, who endeavor to solve problems of collective action on a central, non-hierarchical level.

The review of the three literature traditions on policy networks—American, British, and Continental Europe—shows that although each developed separately, they refer to more or less similar phenomena. Borzel (1997) notes that sometimes, similar labels describe different phenomena, or different labels refer to similar phenomena and these lead to confusion and misunderstanding in the discussion of policy networks. The conceptualizations used in the three traditions (terms and associated characterizations) are presented in Table 3.1.
Table 3.1. Conceptualizations of Policy Networks in Three Traditions

<table>
<thead>
<tr>
<th>Term Used</th>
<th>Characteristics of Network</th>
<th>Tradition</th>
</tr>
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<tbody>
<tr>
<td>Subgovernment</td>
<td>- Clusters of individuals in the decision-making in a given substantive area of policy&lt;br&gt;- Members of the House and/or Senate, members of Congressional staffs, bureaucrats, representatives of interest groups</td>
<td>American</td>
</tr>
<tr>
<td>Subsystem</td>
<td>- A pattern of interactions of participants in decision-making in a special area of public policy&lt;br&gt;- Executive bureau, congressional committees, and interest groups</td>
<td>American</td>
</tr>
<tr>
<td>Issue network</td>
<td>- A shared knowledge group of a large number of participants in a public policy&lt;br&gt;- No stable set of participants, vertical interdependence</td>
<td>American</td>
</tr>
<tr>
<td>Policy Community</td>
<td>- Networks with stability of relationships and shared norms among the community&lt;br&gt;- Stable, highly restricted membership, vertical interdependence</td>
<td>Britain</td>
</tr>
<tr>
<td>Governance</td>
<td>- Informal interactions between public and private actors with distinct, but interdependent interests to solve problems of collective action&lt;br&gt;- Interdependent individuals and organizations in public and private sectors, horizontal interactions</td>
<td>Continental Europe</td>
</tr>
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</table>
It can be argued that the policy network approach has become the dominant paradigm for the study of the policymaking process in the British political science and it has assumed great importance in Continental Europe and the U.S. The concepts like subgovernment, subsystem, iron triangle, policy community, and governance are used in different contexts; they all aim to capture various forms of relations among governments and other actors in policy areas (Dowding, 1995; Freeman & Stevens, 1987; Jordan, 1990; Rhodes, 1997; Waarden, 1992).

The development of the concept of subgovernment in the U.S. provided a major impetus to the policy network perspective. Whereas subgovernment and subsystem are characterized as relatively restricted forms of networks with highly restricted membership, the theory of issue networks views the policy process as an ad hoc process with open participation and limited consensus on policy issues (Jordan, 1990). Policy communities are a form of policy networks that promote stability and continuity by routinizing relationships among actors. Governance is broader than other concepts in that it refers to self-organizing and relatively autonomous networks.

In the next section, I examine how the policy network approach has developed in the field of public administration and public policy and address the conceptualizations of the term policy network in the relevant literature.
B. The Network Perspective in the Field of Public Administration and Public Policy

In the previous section, I examined the historical development of the policy network theories in the three distinctive traditions: the American, British, and Continental European traditions. In this section, I review the conceptualizations of the term policy network in the field of public administration and public policy and its various applications in the relevant literature.

The growing use of network concepts stems from the changes in the environment in which policy actors act. As the environment becomes complex and policy actors face more “wicked problems” (Weber & Khademian, 2008, p. 334), dealing with these complex problems requires the development and use of complex networks involving organizations from different sectors and levels. In networked settings, governments are required to collaborate or coordinate with other parties to achieve success. The network perspective in public administration and public policy developed in response to the changing environment, particularly with the increased realization of the multi-centered and complex nature of the policy implementation processes and in the intergovernmental relations in the late 1970s and early 1980s (Ferlie, Lynn, & Pollitt, 2005). In this perspective, policy processes take place within networks of actors that are mutually dependent on each other.

In the public administration literature, scholars have used the term network in many different ways. The concept of network originally emerged in the organizational theory literature in sociology and political science (Adam & Kriesi, 2007; Kickert, Klijn, & Koppenjan, 1997). Sociologists began to develop their understanding of social
networks and the techniques of social network analysis in the 1960s and 1970s. Their discussion of social networks were based upon three assumptions: first, structural relations are important; second, social networks (i.e., direct/indirect social relations) influence actors’ beliefs, perceptions and actions; and third, these structural relations should be understood as dynamic processes that are continually changing through interactions among people, groups, or organizations (Knoke & Yang, 2008).

These earlier roots in the organizational theories and political science provided a promising perspective on policymaking; public policy is a sphere where interactions and relation patterns among diverse actors and their strategies are formed and evolved to contextualize the policy processes (Klijin, 1996). The policy network concept in the public administration and public policy literature is used in different ways. Scholars define networks as structures of interdependence among multiple organizations and individuals (O’Toole, 1997), or as collaborative processes facilitating and operating in multi-organizational arrangements to solve problems (Agranoff, 2006; Thomson & Perry, 2006). Networks are understood as a form of authority structures and a collaborative device to allocate resources and coordinate joint actions. When defined as multilateral collectivities, networks are seen as complex entities that go beyond the traditional organizational forms (Provan & Kenis, 2008).

Kickert, Klijin, and Koppenjan (1997) emphasize relational characteristics in the concept policy networks. They define policy networks as “(more or less) stable patterns of social relations between interdependent actors, which take shape around policy problems and/or policy programmes” (Kickert, Klijin, & Koppenjan, 1997, p. 6). Carlson (2000) also understands policy networks as “cluster[s] or complexes of organizations
connected to each other by resource dependencies and distinguished from other clusters or complexes by breaks in the structure of resource dependencies” (p. 3). The definitions by Kickert, Klijin, and Koppenjan, and Carlson are meaningful in this study as the concepts presuppose the existence two main features as an analysis unit, links and actors, viewed from a horizontal rather than a vertical perspective.

The uses and applications of networks in the analysis of public policy processes first emerged in the mid-1970s and early 1980s (Kickert, Klijin, & Koppenjan, 1997). A review of scholarly literature reveals that the network studies in the field of public administration and public policy can be divided into three main categories.

In the first category, there are those studies that discuss the structural features of governance and/or policy networks and the configurations of actors embedded in them (Kapucu, Augustin, & Garayev, 2009; O’Toole, 1997; O’Toole & Meier, 2004; Provan & Kenis, 2008; Provan, Veazie, Staten, & Teufel-Shone, 2005; Provan, Veazie, Staten, Teufel-Shone, & Huddleston, 2003). Networks are structures of interdependence involving multiple organizations or their parts, where one unit is not merely the formal subordinate of the others in some larger hierarchical arrangement (O’Toole, 1997, p. 45; 2014). Policy process is viewed as an interaction process in which various actors exchange knowledge and information about policy problems and trade off goals and resources (Kickert, Klijin, & Koppenjan, 1997). This body of the literature follows the classical basis that a network is an interaction system and it has to influence in some way the interactions that take place in it. The term structure has been reserved for the relational patterns among actors, but the way these patterns are created and sustained has not been addressed (Klijin, 1996). Therefore, policy networks are understood as
interpersonal relationships or complex interactions among many actors who aim to achieve their policy goals and strategies (Compston, 2009; Heclo, 1978; Kickert, Klijin, & Koppenjan, 1997).

The recognition of the complex of policy network structures led some scholars to pay attention to the impact of network structure on policy change. Policy theorists argue that in general networks are stable over time. According to Kickert, Klijn, and Koppenjan (1997), for example, policy networks show “stable patterns of social relations between interdependent actors, which take shape around policy problems and/or policy programs” (p. 6). Others like Provan and Kenis (2008) observe that network relationships change over time as contingency conditions evolve. They argue that change is inevitable in networks. These changes were studied with longitudinal studies by some researchers (e.g., Provan, Fish, & Sydow, 2007). Policy network theory is a promising framework to explain policy change. Policy change is a result of the modifications in resource exchanges or preferences among policy actors. Sometimes, exogenous factors, defined as actual change in reality (i.e., changes of government, economic events, scientific and technological developments, and so on) affect directly and indirectly the configuration of policy network and cause policy change (Compston, 2009). The findings of my dissertation study contribute to scholarly understanding the structural characteristics of the policy networks and their evolution by examining how the policy networks change over time in the case of SCHIP process between 1997 and 2007.

Some scholars point out the lack of attention to the management aspect in the network literature (Klijin, 1996; Rhoes, 1990). The second category of the policy network literature focuses on the linkage of network settings and public management
Several empirical studies have shown that there is a positive relationship between network structure and its effectiveness in a given policy area. For example, a study Agranoff and McGuire (1999) undertook showed that more than two hundred U.S. cities formed multiorganizational settings in order to manage their economic development. They argue that despite the different strategic types of networks, the networks among intergovernmental agencies successfully promoted the overall performance for local economic policy. Network management and collaboration is the continuing importance in intergovernmental relations and management. They gave attention to the links between local governments and nongovernmental organizations and the growing conjunctions of federal and state government public managers with nongovernmental organizations in networks that negotiate policy adjustments. The studies are expanding the concepts of nonhierarchical management in the public sector as a model of collaborative and cooperative public management.

Milward and Provan (1998) conducted an empirical study on the effectiveness of networks in mental health services. Their study demonstrated that the effectiveness of mental health services is closely related to the network structure. According to Milward and Provan, network effectiveness is more likely to be high as the network is integrated in a central way and is controlled by the state in a direct way. Meier and O’Toole (2001)
confirmed the findings of the previous studies on network effectiveness. They provided evidence that the way public managers operate in networks positively affects performance in public education programs. They found that school districts with higher levels of network interactions among superintendents are more likely to have better performance than those with lower levels of network interactions. They concluded that better network management tends to allow superintendents to transform resources into outputs in a more efficient way. In other policy fields such as crisis management or emergency management, scholars highlighted the importance of networking structures (Comfort, 2007; Kapucu, Augustin, & Garayev, 2009; Moynihan, 2008). These studies confirmed that networks and partnerships in the crisis/emergency management play a crucial role as policy instruments in addressing disasters. The formal or informal networking of public, private, and nonprofit organizations permits these groups to achieve the intended outcome in a more cooperative way.

Whereas many studies acknowledge the importance of network structure in successful public management, some research studies show the dark side of the network structure. O’Toole (1997) explored why the possibility of successful implementation in networks are low. Networks include “a wide range of structural possibilities, with the elements held together by authority ties, exchange relations, and/or common interest based coalitions” (p. 117). An attempt to implement innovations means dealing with heightened levels of uncertainty and incomplete institutionalization. In certain conditions, major characteristics of networks – complexity and uncertainty – could diminish the efficiency and accountability of managing the innovation implementation.
The nature of uncertainty and complexity in networks makes it difficult to evaluate their effectiveness. Provan and Milward (2001) argued that the evaluation of network effectiveness should be discussed at three levels of analysis: community, network, and organization/participant levels. The cooperative, interorganizational networks are an attractive mechanism for delivery of public services, specifically health and human services. However, network effectiveness at one level does not ensure effectiveness at another level as key stakeholders and their interest are diverse. For instance, successful performance and client outcomes at the network level may be achieved through actions that run counter to the goals of organizational level stakeholders (Provan & Milward, 2001).

The last category of network studies centers on the cooperation, collaboration and accommodation in networks (Bryson, Crosby, & Stone, 2006; Cooper, Bryer, & Meek, 2006; Leach, 2006; McGuire, 2006, Thomson, & Perry, 2006). These authors understand networks as tools of more democratic, participatory process within the governance setting. Networks are considered to be flexible, efficient, and innovative organizing structures that enable participants to achieve something collectively that could not be accomplished individually. In this body of literature, a network is a desirable structure to facilitate collaboration and coordination among participants through shared norms and mutually beneficial interactions to accomplish their purpose (Thompson & Perry, 2006). Collaboration in networking settings has the potential to create value and to accrue key resources and power needed to accomplish tasks in the organization. Networks can coordinate formal/informal rules and norms and safeguard exchanges among participants. As performance relies on the capacity to transfer resources and information across a wide
range of participants, and the capacity for learning to take place among participants, networks are viewed as an alternative to other structures such as hierarchical and fragmented administrative systems (Weber & Khademian, 2008).

Agranoff (2006) identifies the benefits and impacts of collaboration when public managers work within inter-organizational networks. One of the benefits is the value that the network structure creates in the organization. The value includes learning new ways to collaborate, intergovernmental skills, and how to network, along with communications, information, and technological skills. The process of decision-making is different from other forms of organizations. Collaborative decisions or agreements do not follow parliamentary procedure; rather they follow a process of mutual learning and adjustment. In the collaborative structure, decisions and agreements are based on consensus not conflict, inasmuch as participating administrators and professional are partners, not superior-subordinates. Authority and resources are shared with the many stakeholders engaging in collaboration. In this sense, decision-making in collaboration is similar to the function of knowledge-seeking within organizations. Overall, as public managers face today’s wicked policy problems, public management networks have a collaborative effect in building collective capacity for solutions (Agranoff, 2006).

The organizational features of the collaborative networks are frequently addressed by scholars. Collaboration is different in a sense that it is non-hierarchical, participants are equal representatives, consensus and deliberation lead to optimal decisions and actions, resources are multi-sourced, and there are relatively few sanctions (Agranoff, 2006; Provan & Kenis, 2008). Paying attention to its structural configurations, collaboration can be defined as “the linking or sharing of information, resources,
activities, and capabilities by organizations in two or more sectors to achieve jointly an outcome that could not be achieved by organizations in one sector separately” (Bryson, Crosby, & Stone, 2006, p. 44). Collaborative networks have several structural features. First, in the collaborative setting, diverse actors, including government, business, nonprofit organizations, communities, and the public, formed joint relations. Second, the relations may be vertical through levels of government, or consist of horizontal arrays among the network actors. Third, the collaboration may take diverse forms such as formal networks, coalitions, cooperative partnerships, or information coordination. Lastly, the collaborative structure may be intermittent, temporary, or permanent (Bryson, Crosby, & Stone, 2006). In broader terms, the concept of collaborative networks is understood as the enduring exchange relations established among organizations, groups, and individuals (Weber & Khademian, 2008). From this broad viewpoint, some scholars regard collaboration as a process in public administration in that it involves a series of activities of various agencies and related organizations in achieving a shared, particular goal.

2. Network Approach and the Advocacy Coalition Framework

Policy network theorists have agreed upon the concept of policy networks as clusters of actors in a given policy sector, influencing on policy processes. A wide range of actors from governmental and nongovernmental institutions strives to implement policies and predict the outcomes of policymaking by joining the networks. In the studies on policy networks, scholars stress the importance of the process of coalition formation (Klijin, 1996). Policymaking occurred in a setting of closely integrated relations among a
variety of actors, and a cluster of these networks is formed and connected by resource dependencies. The interactions among these different actors with different strategies and interests are complex and can have unforeseen consequences.

However, the studies of policy networks have not provided the theoretical explanations to identify the causes and rationales of the policy network formation. Some criticized that there are no agreed theories of policy networks that would lead us to predictive claims in understanding policymaking and policy implementation processes. Though quantification in the manner of the sociological network tradition may enable us to see some of the general features which attach to network structures, network analysis has proved inadequate in providing fully determined causal analysis of particular networks in structural terms. Some network theorists simply believe this to be due to the state of the research program and the quality of the data recorded thus far (Dowding, 1995). However, this limitation of the policy network approach can be overcome by linking quantitative analyses of policy networks to the established approaches of public policy theories (e.g., the Advocacy Coalition Framework). In this section, I explore the area of synthesis between the policy network approach and the advocacy coalition framework (ACF).

The advocacy coalition framework (ACF) is an appropriate framework to use when it comes to understanding policy network structures and the beliefs network actors hold as a driven factor to form networks in the policy process (Sabatier & Weible, 2007). In the ACF, the policy process is a system of interactions among policy actors; the ACF posits that the changes in the belief systems of these actors produce incremental policy changes in a “policy subsystem” (Kubler, 2001; Kubler, 2007; Sabatier & Jenkins-Smith,
1993; Weible, 2005; Weible & Sabatier, 2005). Policy actors interact within a policy subsystem and their behaviors and interactions are affected by broader political and socioeconomic systems. A policy subsystem is defined as the “interaction of actors from different institutions who follow and seek to influence governmental decisions in a policy area” (Sabatier & Jenkins-Smith, 1993, p. 16). A policy subsystem has a geographical boundary and substantive policy topic. It also includes a set of actors from different levels of government, lobbyists, policy advocates, and representatives of other organizations involved in policy development and implementations (Weible & Sabatier, 2007).

The concept of subsystem is used also in the literature on policy networks. Freeman (1965) provides the following definition.

Subsystem, as used here, refers to the pattern of interactions of participants, or actors, involved in making decisions in a special area of public policy. Furthermore, although there are obviously other types of subsystems, the type which concerns us here is formed by an executive bureau and congressional committees, with special interest groups intimately attached. (p. 11)

Some subsystems are comprised of a few key individuals in each sector and have little internal complexity, while other subsystems “are more complex, loosely defined systems, involving numerous agencies and interest groups” (Hamm, 1983, p. 575). Subsystems vary in terms of cooperation between participants. Some subsystems are highly cooperative with little disagreement among participants, while other subsystems
experience disagreement and conflict among participants (Hamm, 1983). Like policy networks, policy subsystems are networks of individuals and organizations, including from interest groups, academia, specialists, Congress, executive agencies, state and local governments, think tanks, and to other subsystem actors and organizations. Subsystems link together actors and organizations in “the public and private sectors, the branches of government and the different levels of the federal systems” (Milward & Wamsley, 1984, p. 5). Policy subsystems are organizational networks involved in public policy; therefore, all policy subsystems are policy networks.

The policy subsystem is also dependent upon its social, political, and economic resources to maintain itself. However, it is the belief systems attached to policy actors that create new subsystems or maintain existing subsystems. Sabatier and Jenkins-Smith (1993) propose that policy actors in the subsystem form coalitions based upon their own belief systems and pursue to translate their beliefs into public policies or programs. The belief system consists of three structural categories: a deep core belief of a person’s underlying personal philosophy, a policy core of basic strategies and policy positions to attain deep core beliefs in the policy area, and a set of secondary beliefs of instrumental decisions or information (Zafonte & Sabatier, 2004). The belief systems motivate advocates of the policy subsystem to achieve public policies that reflect their core beliefs.

While traditional notions of policy networks (e.g., iron triangles or whirlpools) are generally limited to include those actors such as administrative agencies, legislative committees, and interest groups, the ACF points out the emergence of specialists in a given policy area. In the ACF, a subsystem is expanded to include journalists, analysts, researchers, and others who play important roles in policy formulation and
implementation as well as actors who play key roles in the generation and dissemination of policy information (Gupta, 2012). Subsystems normally contain a large and diverse set of actors who share a particular belief system. These actors’ activities can be the crucial focus of analysis to understand policy change over respectively long period of time.

An important aspect of the ACF is its attention to the alignments and activities of policy actors and their influences on policy change. The ACF describes that policy actors’ beliefs and behaviors are embedded within informal networks and policymaking is structured by the networks among key policy actors in any given policy subsystem (Sabatier & Weible, 2007). According to Sabatier and Jenkins-Smith (1993) and Zafonte and Sabatier (2004), these coalitions remain stable over a decade or more. ACF emphasizes the significance of coalitions remaining stable for long periods. ACF also emphasizes the significance of beliefs not only to define the policy issue in support or opposition but to motivate and solidify the advocacy coalitions to achieve the policy change. However, the stability is interrupted only when external perturbations cause coalition members to redefine their internal belief systems significantly (Sabatier & Weible, 2007). When this happens, major policy change becomes likely.

The ACF provides a theoretical ground of my research because the framework is about policy changes over a decade or more. I study a relatively long period of time from the SCHIP authorization in 1997 to the SCHIP reauthorization in 2007. In this study, I explore whether there were any configurations of networking coalitions in the SCHIP policy processes as predicted by the ACF and the rationales that drive the formation of networking coalitions. I also considered how the changes in policy actors’ beliefs affect the policy processes and bring policy changes.
3. Issue Networks and Advocacy Coalition Framework

At the end of the 1970s, public policy theorists observed that the governance structures of Western democracies had undergone several critical changes over the past few decades (Kenis & Schneider, 1991). Most notably, scholars noted that politics, programs, and agencies had become increasingly differentiated by functions. Additionally, policy domains had become more crowded with the growth of nongovernmental, private sectors. The government has become more decentralized and fragmented, and the boundaries between the public and private sectors have become blurred. This increased complexity of policy arena required better scientific expertise to detect the technical nature of policy problems, and many political tasks could no longer be accomplished without the assistance of nongovernmental organizations. As a result of this changing environment, governments have become dependent on the cooperation and/or collaboration of policy actors beyond their hierarchical control (Jordan & Richardson, 1983). The policy formulation and implementation processes require the integration and interdependence of a wide array of public and private actors.

Heclo’s (1978) notion of issue networks was the paradigm for understanding these patterns of interaction between government officials and interest groups in public policymaking in the U.S. in the 1970s. Heclo challenged the earlier understanding of the policy network approach that missed the open networks of people that increasingly affect upon government activities. According to him, the conventional views such as iron triangle or subgovernment supposes closed alliances between a limited number of participants from the executive branch, congressional committees, and powerful interest
groups in shaping policies in a particular area. He argued that as a result of the expansion in government activities, the increase in the specialization of government units, and the proliferation of issue-conscious groups, the traditional notion of iron triangles fails to explain the structural arrangements in policymaking. Rather, the concept of issue networks should be used to characterize the contemporary policymaking process. According to Heclo (1978), issue networks are conceptualized as “shared-knowledge group[s] having to do with some aspect…of public policy” (p. 103). Actors in an issue network have a “common base of information and understanding of how one knows about policy and identifies its problems” (p. 104).

Issue networks differ from the iron triangles and subgovernments in several ways, such as size, accessibility, flexibility, and level of competition (Berry, 1997). As we reviewed in the previous sections, iron triangles represent a closed and stable relationship between interest groups, governmental agencies and legislative committees with their compatible goals. Policy community serves as a label for shared experience, common language, and frequency and mode of communication (Jordan & Schubert, 1992). The iron triangle and subgovernment perspectives suggest that a policy emerges from the relationships of a small set of political actors working in tight, long-term relationships, and suppose a low degree of competition among policy actors. In contrast, the issue network approach understands the policy process as fluid, compromising a large number of participants with varying degree of mutual commitment and desire for power (Heclo, 1978). Heclo does not suggest that issue networks concept should replace the more familiar concept of iron triangles. Instead, he argues that the issue networks might
overlay the existing political powers and impose considerable strains on them. The issue networks could bring complexity and unpredictability to government leadership.

The issue network concept has been popular and applied the notion of networks to explain policymaking at the state and national levels across a variety of policy domains and issues. It is through issue networks that policy issues tend to be refined, evidence debated, and alternative decisions made. Policy actors of issue networks developed their relationships with each other to articulate ideas and policy preferences and ultimately develop policy (Hula, 1999). According to the issue network approach, policy change is a product of interaction of policy actors with mutual intellectual or emotional commitment (Heclo, 1978). As government activities and regulations have grown, the value of policy specialists who understand the complex policy environment has appreciated. Any participants who are well informed about a particular policy issue – regardless of formal professional training – are also encouraged to participate in the policy activities. In the issue networks, these actors move in and out of the networks constantly, not a stable set of participants (Heclo, 1978). The issue network approach supposes that a policy decision results from non-hierarchical, interdependent relationships among a wide array of governmental and non-governmental policy actors who have a common interest in a specific public policy area (Kenis & Schneider, 1991; Kirst, Meister & Rowley, 1984; Rhodes & Marsh, 1992).

The advocacy coalition framework (ACF), as an extension of the issue network approach, can be a good theoretical framework to use when it comes to understanding the rationales of policy network formation (Sabatier & Jenkins-Smith, 1993). In the ACF, policy actors form advocacy coalitions based upon their belief systems (deep core beliefs,
policy core beliefs, and secondary beliefs) that determine individual actors’ choices and actions in the public policy processes. These coalitions and the common beliefs of network actors can be studied using social network analysis tools. According to Sabatier (1993), a critical contribution to understanding policy change over time was made by Heclo and Wildavsky’s (1974) analysis of British and Swedish welfare policy during the initial decades of this century. In this study, Heclo and Wildavsky (1974) argue that policy change results from both large-scale of social, political, economic changes and the interaction of various sets of participants within a policy community. The interaction of the policy actors within a specific policy area was important as they gradually learned more about various aspects of the problem over time and reached an agreement on their policy objectives. In essence, the ACF is in line with Heclo’s observation that policy change is a product of the interactions among people in a policy system. Sometimes actors’ material interests are secondary to intellectual or emotional commitment in joining the issue networks. The ACF is in line with Heclo’s argument that networks may be mobilized as a shared-action group (creating a coalition) or a shared-belief group that have a common base of information and understanding about policies.

4. Resource Dependence Theory, Advocacy Coalition Framework, and Network Theories

The resource dependence theory (RDT) can be a complementary framework to the ACF and the policy network theory. In a policy network context, the RDT emphasizes that policy actors use collaborative ties to maximize their access to resources they need to
carry out their policy goals (Henry, 2011). In this section, I briefly review the RDT as a possible way to understand the SCHIP network structure and policy process.

The RDT has its theoretical foundation in organizational theory. The core assumptions of the RDT are that all organizations are resource-insufficient at varying degrees and they are embedded in a wide variety of networks that provide them with opportunities to acquire their resources and organizational goals. The heavier the dependence of an organization on external resources, the higher the likelihood that those actors who control the resources are more influential in the organization. The theory also suggests that formal arrangements, as well as informal norms that are generated through interactions among actors, shape organizational power structures and influence organizational decision-making (AbouAssi, 2013).

The propositions of the RDT have some resonance with those of the ACF. Though beliefs are a fundamental rationale to explain the coalition formation, the ACF proposes that the actors of a policy coalition use available resources that enable them to influence policymaking decisions. In the ACF, actors need to specialize in order to be influential and subsystems are composed of different actors involved in any given policy area. These actors commonly coalesce into two to four advocacy coalitions based on shared policy beliefs. Unless the coalition structure undergoes substantial changes, dominant coalition members remain stable than initiate major changes in policy programs. However, when the coalition structure is disturbed and political resources redistributed, policy changes occur. The ACF presented a typology of resources that coalitions utilize to influence policy. The resources include formal legal authority to make policy decision; public opinion; information; mobilizable supporters; financial resources; and skillful
leadership (Sabatier & Weible, 2007). The ACF’s basic argument is that coalition members constantly seek to exploit these resources strategically in order to change existing policies. The RDT suggests that policy actors attempt to form collaborative ties with those who are influential in the subsystem in order to access to critical resources such as information, technology, personnel, or political clout (Henry, 2011). In this sense, the RDT offers a useful set of concepts to explain policy actors’ behavior and policy outcomes in the complex policy processes by identifying the set of resources available to coalitions.

The propositions of the RDT also have similarities with those of policy network theories. Rhodes (2007) conceptualizes a policy network as “a cluster or complex of organizations connected to one another by resource dependencies” (p. 37). According to Rhodes (1997), in a policy network, actors from the various levels of institutions are interdependent but trying to maximize influence over policy outcomes by deploying their resources. This power-dependence model explains that networks are rooted in resource dependence.

Policy networks develop around policy issues and resources that are needed to deal with policy problems (Kickert, Klijn, & Koppenjan, 1997). Compston (2009) defines a policy network “a set of political actors who engage in resource exchange over public policy (policy decisions) as a consequence of their resource interdependencies” (p. 11). Compston also discusses how changes in policy network variables – policy actors and their resources, preferences, strategies and perceptions of problems and solutions – cause changes of policy outcome by changing the nature and content of resource exchanges. Koliba, Meek, and Zia (2011) also emphasize that interactions among network actors
should be defined “in terms of resources they bring into the network” (p. 84). The approach of these researchers identifying types of resources stems from the theory of social exchange. A resource is equated with an asset (or capital, in a broad sense) that is exchanged between network actors. Koliba, Meek, and Zia (2011) distinguish eight types of resources: financial resources; natural resources; physical resources; human resources; social resources; political resources; cultural resources; and intellectual/knowledge resources. While Compston’s approach places an emphasis on the political aspect of the process of resource exchange in a network, Koliba, Meek, and Zia emphasize functional categories of resource exchange.

According to the RDT, policy actors are engaged in searches for the resources they need to increase their abilities to effectively control and influence both the behavior and the beliefs of other actors, and thus the decision-making in the policy subsystem (Pfeffer & Salancik, 1978; Weible, 2007). The RDT further assumes that organizational actors are unable to produce the necessary resources to achieve their goals on their own, and that they therefore seek to establish relationships with other actors in order to obtain needed resources (Matti & Sandstrom, 2012).

Several scholars conducted empirical studies to examine resource dependencies in networks (Huang & Provan, 2007; Lundin, 2007; Provan & Huang, 2012). Knoke, Pappi, Broadbent, and Tsujinaka (1996) define two kinds of policy networks: information exchange networks and resource networks. Information exchange refers to intangible assets such as political, legal, or scientific knowledge. When information is exchanged, the first possessor still has the information. Resources consist of physical commodities such as money, labor power, of facilities whose control can be transmitted from one actor
to another. Networks of resource and information exchange constitute two fundamental political structures in contemporary governance. Centrality in both the resource and information exchange networks leads to increased reputation for public policy influence; moreover, increased centrality in either network is associated with increased public participation in public policy activities. Consistent with a network resource perspective, Provan and Huang (2012) argue that resources are accessed and sustained through network connections.

In my dissertation study, I aimed to explore the resources that policy actors utilize and exchange in the SCHIP policy processes. However, I could not find any relevant information about the resources in the text analyses. Therefore, the discussion about resources as a key part of policy networks are limited and excluded in the Result Chapter and Discussion Chapter.

The RDT could be a complementary approach to produce a series of perspectives with which to explain empirical outcomes. The purpose of this study is to improve our understanding of policy networks by combining the insights of the policy network theory and the ACF. The value of using multiple theoretical lenses is that they produce different answers to the same question and prompt us to seek evidence that we would not otherwise uncover (Cairney, 2013).
CHAPTER 4. PROPOSED MODEL OF POLICY NETWORK STRUCTURE AND POLICY CHANGE

The conceptual model I propose for my dissertation study is grounded in the theoretical propositions of the policy network theory (PNT) and the advocacy coalition framework (ACF). Specifically, I examined the policy processes of SCHIP authorization and reauthorization by combining various views from the Sabatier and Jenkins-Smith’s (1993) ACF, the revised version of the original ACF (Weible, Sabatier, & McQueen, 2009), the most recent version of the ACF (Jenkins-Smith, Nohrstedt, Weible, & Sabatier, 2014), and the PNT approach.

The ACF can help us understand the process of policy change as a consequence of the interactions among actors on the basis of shared belief systems. As I discussed in the previous chapter, policy actors who share a belief system form alliances that are called “advocacy coalitions” and attempt to “manipulate the rules, budgets, and personnel of governmental institutions in order to achieve [their] goals over time” (Sabatier & Jenkins-Smith, 1993, p. 5). Advocacy coalitions bring about policy change by modifying the prevailing beliefs and behavioral patterns in a community (Sabatier & Weible, 2007).

An overview of the policy process within the ACF model is presented in Figure 4.1 below.
I integrate some of the concepts of the ACF regarding the beliefs of actors into my model of policy networks. The ACF model I propose to apply in the Illinois SCHIP case is shown in Figure 4.2. The model in Figure 4.2 is based on the ACF assumption that the activities of policy networks (coalitions) have impacts on policy outcomes. In this study, I delimited my study to the “policy networks subsystem” part of the ACF. I
specifically tested the ACF’s hypothesis that there will be pro- and against-policy coalitions in the Illinois SCHIP case.

![Figure 4-2. A Conceptual Model of Policy Networks Structure and Policy Change](image)

I first examined the ACF assumption that a policy subsystem is the most useful unit of analysis to study a policy process (Weible, 2007). The policy subsystem refers to a set of policy actors from all levels of governments as well as other specialists in policy areas. Identifying the appropriate scope of a policy subsystem is important, but it is not easy to define the subsystem because (sub)systems normally overlap. In my study, I conceptually delimit the subsystem to the actors and their interactions in the SCHIP policy processes in Illinois.
Second, the ACF posits that within a given policy subsystem, there are generally two to five advocacy coalitions (Sabatier & Weible, 2007). In this study, I explored whether the ACF’s assumption regarding the competing coalitions is correct in the case of the SCHIP in Illinois. Further, I attempted to find better conceptualized terms if the ACF’s coalitions are not appropriate to explain the Illinois SCHIP case. In my preliminary study of the SCHIP in Illinois, I found that there were two polarized advocacy coalitions in the SCHIP (re)authorization subsystem—a pro-(re)authorization of SCHIP coalition and against-(re)authorization of SCHIP coalition—but this dichotomous structure was not repeated in all the following years.

Third, according to the ACF, policy actors in a particular coalition are likely to hold similar belief system. Based upon their belief systems, there will be the competition between two polarized coalitions in the policymaking process. An important proposition of the ACF is that a belief system of an individual policy actor consists of a three-tiered hierarchical structure: deep core beliefs, policy core beliefs, and secondary beliefs (Sabatier & Weible, 2007). Actors form coalitions according to the degrees to which they share their beliefs at these three levels. The deep core beliefs and policy core beliefs are most resistant to change and they hold coalition members together. I aimed to identify the clustering of policy actors in the coalitions and their beliefs by conducting a series of cluster analyses.

In my research I also intended to identify the set of coalition resources that policy actors possess and exchange by establishing contacts to other actors. In explaining policy process in terms of policy networks and resource interdependencies, Compston (2009) provides a list of tradable resources which are exchanged among policy actors throughout
policy process. I employ Compston’s typology of tradable resources in order to analyze the types of coalition resources. I discuss the details of Compston’s typology in Table 4.1.

Table 4.1. Types of Tradable Resources

<table>
<thead>
<tr>
<th>Types of Actor</th>
<th>Tradable Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Actors Alone</td>
<td>Policy amendments</td>
</tr>
<tr>
<td></td>
<td>Access</td>
</tr>
<tr>
<td>Public and Private Actors</td>
<td>Veto power</td>
</tr>
<tr>
<td></td>
<td>Information</td>
</tr>
<tr>
<td></td>
<td>Cooperation with implementation</td>
</tr>
<tr>
<td></td>
<td>Resources to the courts</td>
</tr>
<tr>
<td></td>
<td>Political support</td>
</tr>
<tr>
<td></td>
<td>Patronage</td>
</tr>
<tr>
<td>Private Actors Alone</td>
<td>Private investment</td>
</tr>
<tr>
<td></td>
<td>Fluid funds</td>
</tr>
</tbody>
</table>

Source: Adapted from Compston (2009)

My initial readings on the case of the SCHIP in Illinois indicated that the policy processes were complex and that multiple actors with interdependent relationships played roles in them. The policy network theory is a natural choice for modeling this complex policy process in that the theory conceptualizes the networks of policy actors and maps the patterns of interactions among them, and assesses the influence of interaction patterns on policy processes (Klijn & Koppejan, 2000; Leifeld, 2013). The ACF is compatible with the PNT as the application of the ACF helps analyze coalitions and find the reasons of coalition formation. In the ACF, the policy subsystems are composed of advocacy coalitions, which are collections of actors sharing similar beliefs and coordinating their actions to achieve political goals (Matti & Sandstrom, 2012; Sabatier & Jenkins-Smith, 1993; Sabatier & Wieble, 2007). As a conceptual and analytical tool, the PNT can help us
investigate the characteristics of policy coalitions that are mapped by the ACF. The ACF views the policy process as a competition between coalitions of actors that hold competing beliefs about policy problems and alternative solutions.

The research questions I proposed earlier are based on the above theoretical elaborations. The following discussion shows how.

My first general research question is the following:

1. What are the characteristics of the policy networks in the SCHIP policy processes in Illinois?

If the ACF’s prediction may be true in the Illinois case, subsequent research questions are followed:

1-a. Were there two policy coalitions (networks), one pro-policy and one against-policy, in the SCHIP policy processes in Illinois, as predicted by the ACF, or were there different configurations of networks, during the period studied: 1997-2007?

In their revised version of the ACF, Weible and Sabatier (2009) point out that policy change is related to the density and membership of coalitions. By applying the social network analysis tools (AutoMap and ORA), I analyzed the structural characteristics of coalition such as network size, degree of centralization, and density.
The following research questions help me to understand the specific structural characteristics of policy networks involved in the SCHIP policy processes:

1-b. Once the policy coalitions (networks) are identified in each of the years analyzed (1997-2007), what were the structural characteristics (whole network characteristics) of these networks?
   i. What were their network sizes?
   ii. What were the degrees of centralization of these networks?
   iii. What were their network densities?
   iv. Did these network characteristics change over time in the period between 1997 and 2007?

My second general question is as follows:

2. *What were the characteristics of the individual and organizational actors of these networks?*

Under this general question, I asked the following specific questions to explore key actors in the SCHIP coalitions and their beliefs. In the ACF, coalitions among policy actors shape policy processes and the preferences and belief systems of these actors help to form the coalitions (Weible, 2006). The beliefs that policy actors hold are one of the factors affecting their behaviors and influence in policy networks (Rhodes & Marsh,
1992). The following specific research question addresses the key actors and the role of these actors’ beliefs in policy change of the Illinois SCHIP case:

2-a. Who were the central actors in each of the coalitions (networks) and how did these centralities change?

2-b. What were the beliefs (“knowledge” as they are measured in ORA) in each of these coalitions (networks)?
   i. What beliefs were most important (attached to the most central actors and/or most frequently cited in the texts that will be analyzed) in these coalitions?
   ii. How did these beliefs of network actors change over time?

The software I used for my network analyses, ORA, has a component named “knowledge,” which is not theoretically the same as “beliefs,” but in ORA the former can be defined in terms of the latter. In my analyses, I coded beliefs as knowledge and interpreted the results of network analyses as such.

Once I identified the network structures (Research Question 1) and the combination of policy actors and beliefs (Research Question 2) by combining the PNT and the ACF, I explore how the structural elements of the SCHIP policy affect policy change. The structural elements of a policy network have influence on policy outcomes (Sandstrom & Carlsson, 2008). The ACF provides a framework to understand how a policy change can be explained by identifying coalitions and interactions across them.

My third general question is as follows:
3. How did the policy network characteristics and their evolutions affect the policy changes in the SCHIP policy processes in Illinois?

The concept of resource dependency is central to policy networks theory. The RDT emphasizes the use of networking ties to maximize an actor’s access to political resources. The ACF addresses the typology of coalition resources that policy actors can use in their aim to influence public policy. These policy-relevant resources include (a) formal legal authority; (b) public opinion; (c) information; (d) mobilizable troops; (e) financial resources; and (f) skillful leadership (Sabatier & Weible, 2007). Compston (2009) particularly pays attention to the main tradable resources and identifies types of resources that relate to the three types of policy actors (see Table 4.1).

Based on the Compston’s typology of resources, I pose the following question:

What were the resources of the actors in each of these coalitions (networks)?

ORA can be used to analyze the relationships among actors, resources, and knowledge. As a complementary approach, I attempted to explore whether there are critical resources that are correlated with coalition actors. However, in this study, the discussion about resources in the policy networks is limited, because I could not identify sufficient references to resources in the texts I analyzed. Therefore, I will not discuss any findings about resources in the results chapter.
In the following chapter, I describe the specific methods that I used to answer the research questions. In order to better understand the structural configurations of the SCHIP policy networks and their impacts on policy change, I conducted network text analyses and dynamic network analyses.
CHAPTER 5. METHODS

In this chapter I describe the research design and data analysis method I used in my study. First, I present the description of and justification for the case I selected. Next, I describe my data collection method. Finally, I describe the data analysis methods I used in the three phases of the study: (1) a network text analysis using AutoMap, (2) a dynamic network analysis using ORA, and (3) interpretations of texts to validate the analyses results.

1. Case Selection

I selected the state of Illinois for this study because it is relatively representative in terms of its successful SCHIP implementation and the dynamic policy process. With the enactment of the federal State Children’s Health Insurance Program (SCHIP) in 1997, the state of Illinois began providing children’s healthcare coverage, KidCare, in 1998. As shown in Table 1 in the previous chapter, over a series of debates, the coverage of KidCare and FamilyCare – healthcare coverage to parents living with their children 18 years old or younger – was expanded in 2002. Illinois’ uninsured rate among non-elderly individuals including children with income below 100 percent of the FPL was higher then the national average in 2002. As the Covering All Kids Health Insurance Act was passed in 2005, All Kids – the nation’s first universal, comprehensive coverage program for children – was implemented in 2006. To policymakers across the nation, All Kids was regarded as a good way to offer insurance to children and as a possible strategy to expand coverage to adults (Couglin & Cohen, 2007).
During the first 10 years of SCHIP implementation, the key legislative developments of the child health show the complexity of Illinois SCHIP policy process. There were a wide variety of key stakeholders who were involved in the SCHIP policy process. They were engaged in debates over the extent to which the program should model private insurance or Medicaid and the way how they support for outreach and enrollment efforts for the first years of the SCHIP implementation. Because of the wide range of policy actors’ and their different political philosophies, policy positions, and interests, it was not easy to reach a compromise. The active discussion on the SCHIP waned with its reauthorization at the federal level in 2007. Therefore, the year 2007 is the logical end of the period in this study. During the period I propose to study, 1997-2007, I paid special attention to how policy actors form coalitions in line with their beliefs (or policy positions), how these coalitions affect key developments in the SCHIP policy process.

Illinois is a good example of the bigger states (i.e., California, New York, Texas, New Jersey, etc.) where there are the complex policy environments, including urban and rural interests and policy coalitions and a variety of policy perspectives and approaches. Illinois is not only a big state, but it has been among the states that received the largest amount of SCHIP funding from the federal government. Among the state that received federal SCHIP funds in the fiscal year of 2008, Illinois ranked 6th, with 293 million dollars (FamiliesUSA, 2009). The federal share for Illinois in the fiscal year of 2014 is still high as 295 million dollars, which is on the 7th among the fifty states (Kaiser Family Foundation [KFF], n.d.).
In large states like Illinois, hierarchical and bureaucratic forms of policymaking and implementation are replaced with self-organizing networks (Stoker, 2004), which is a source of the complexity of the policy processes in them. The analytical approach I applied in my study is suitable for studying this networked policymaking processes.

Another reason to study the Illinois case is that the history of SCHIP in Illinois is long enough to track the evolution of the networks and the impacts of their structural change on the policy processes. Based upon my initial search, there was also a wide coverage of SCHIP in the media, which provides me with sufficient information resources to conduct this study. It is of particular value to a researcher who attempts to examine the long-term policy change in the case of Illinois.

This case study can develop a deeper understanding of the SCHIP policy process and the dynamic interactions among policy actors, but there is a potential criticism of it: This case study is context dependent and, therefore, it might provide little generalizable knowledge to understand policy theories and complex policy process. Nevertheless, a case study method is widely used because it is useful to apply relevant theories and empirically analyze related cases (Foster, McBeth & Clemons, 2010). The policy analysis framework, the ACF that I used for my study, has been applied to a variety of subfields of public policy such as social, economy, healthcare, and the environment. The majority of these applications are limited to the environmental and energy policy domains (Weible, Sabatier & McQueen, 2009). My case study will contribute to the field of public policy process by systematically examining policy theories in the application of the state health policy arena.
2. Data Collection

I tracked the evolution of policy networks in the SCHIP policy processes in Illinois through a longitudinal investigation of the newspaper articles that were published between 1997 and 2007. Archival data or written texts have become more available in recent years. This availability enables social network analysis (SNA) researchers to use them in their longitudinal analyses. The development of new techniques to retrieve secondary data makes the archival data as a popular source to researchers (Knoke & Yang, 2008). Other kinds of archival data, such as government publications, can also be used in SNA. One principal advantage of using archival information (e.g., newspaper or government reports) is that available data provide a researcher with the opportunity to study the past. While conducting a survey of people has several methodological problems, such as the inaccuracy of respondents’ memories, archival data have been a favorite source to track the past and test general propositions about concerned issues (Knoke & Yang, 2008; Wasserman & Faust, 2009). Additionally, compared with other sources of data such as surveys, experiments, or field studies, archival data sources are relatively easier to access. That means using archival data is a relatively cost-effective way by economizing on cost, time, and personnel (Singleton & Straits, 2010). Using archival data sources has its potential problems as well. For example, reporting and understanding of events by journalists may be biased. However, this data collection method still has more validity compared to surveys, asking informants to recollect events that sometimes happen in the far past (Freeman, 2008; Knoke & Yang, 2008).

In this study, I used news media data as my primary sources because news stories are more likely to capture a wider range of policy actors, compared to governmental
documents which include stories about limited numbers of actors involved in the specific domains (Leifeld, 2013). I used AutoMap to mine the network data in the news articles about the Illinois SCHIP from 1997 to 2007.

I conducted my searches for articles in the databases of Newsbank (Access World News), Newspaper Source, and ProQuest (Multiple Databases). I selected four major local newspapers based on their weekday circulation ranks: Chicago Tribune, Chicago Sun-Times, State Journal-Register, and Daily Herald. The keywords I used in my searches were “(state) children’s health insurance program,” “SCHIP,” and “SCHIP in Illinois.” I also added the Illinois versions of SCHIP, “KidCare” and “All Kids,” to my keyword list. I summarize the steps in the search process and address information about data collection method in Table 5.1 (see below).
Table 5.1. Summary of Data Collection Method

<table>
<thead>
<tr>
<th>Databases</th>
<th>Access World News, Newspaper Source, ProQuest</th>
</tr>
</thead>
<tbody>
<tr>
<td>News Media</td>
<td>Chicago Tribune</td>
</tr>
<tr>
<td></td>
<td>Chicago Sun-Times</td>
</tr>
<tr>
<td></td>
<td>State Journal-Register</td>
</tr>
<tr>
<td></td>
<td>Daily Herald</td>
</tr>
<tr>
<td>Keywords</td>
<td>(state) children’s health insurance program</td>
</tr>
<tr>
<td></td>
<td>SCHIP</td>
</tr>
<tr>
<td></td>
<td>SCHIP in Illinois</td>
</tr>
<tr>
<td></td>
<td>KidCare</td>
</tr>
<tr>
<td></td>
<td>All Kids</td>
</tr>
<tr>
<td>Time Period</td>
<td>1997-2007</td>
</tr>
</tbody>
</table>

As I mentioned before, 1997 was the year the SCHIP was enacted in Illinois. Therefore, I determined the year 1997 as the beginning date for my analyses. The year 2007 is the logical end of the period I study because the active discussion on the SCHIP waned after its reauthorization this year. In the years 2006 and 2007, children’s health policy was a salient issue among policy actors in Illinois, as the large number of articles I identified in these years indicates. On the contrary, in 2008, the number of articles was drastically smaller, as the debate had waned. Therefore, I decided not to go beyond 2007 for my study. At the end of my searches I identified a total number of 261 relevant
articles between the years 1997 and 2007 that could be used in network text analyses. I read all the news articles on Illinois CHIP, and less relevant ones were taken out (see Table 5.2 below).

Table 5.2. The Number of Newspaper Articles

<table>
<thead>
<tr>
<th>Year</th>
<th>Chicago Tribune</th>
<th>Chicago Sun-Times</th>
<th>State Journal-Register</th>
<th>Daily Herald</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1997</td>
<td>6</td>
<td>-</td>
<td>-</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>1998</td>
<td>9</td>
<td>2</td>
<td>4</td>
<td>1</td>
<td>16</td>
</tr>
<tr>
<td>1999</td>
<td>11</td>
<td>1</td>
<td>4</td>
<td>5</td>
<td>21</td>
</tr>
<tr>
<td>2000</td>
<td>6</td>
<td>5</td>
<td>3</td>
<td>4</td>
<td>18</td>
</tr>
<tr>
<td>2001</td>
<td>12</td>
<td>16</td>
<td>6</td>
<td>3</td>
<td>36</td>
</tr>
<tr>
<td>2002</td>
<td>3</td>
<td>4</td>
<td>4</td>
<td>-</td>
<td>11</td>
</tr>
<tr>
<td>2003</td>
<td>8</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>15</td>
</tr>
<tr>
<td>2004</td>
<td>4</td>
<td>2</td>
<td>2</td>
<td>-</td>
<td>8</td>
</tr>
<tr>
<td>2005</td>
<td>17</td>
<td>14</td>
<td>18</td>
<td>6</td>
<td>55</td>
</tr>
<tr>
<td>2006</td>
<td>21</td>
<td>7</td>
<td>1</td>
<td>2</td>
<td>31</td>
</tr>
<tr>
<td>2007</td>
<td>19</td>
<td>7</td>
<td>17</td>
<td>-</td>
<td>43</td>
</tr>
<tr>
<td>Total</td>
<td>115</td>
<td>61</td>
<td>49</td>
<td>36</td>
<td>261</td>
</tr>
</tbody>
</table>

In their review of the ACF literature, Weible, Sabatier and McQueen (2009) found that the ACF applications use multiple methods of data collection, such as content analysis, survey questionnaire, interviews, or some combination of these methods. They note that nearly half of the studies applied unspecified methods and relied on unsystematic data collection. The current study contributes to building generalizable knowledge of the policy process by applying clearly specified methods of data collection and analysis. I used a specific version of social network analysis on archived data.
In the following sections, I discuss the data analysis methods I used, including network text analysis, dynamic network analysis, and text interpretation. I analyzed the contents of newspaper articles using Automap, a computerized text analysis tool that extracts and maps networks (http://www.casos.cs.cmu.edu/projects/automap/). I extracted the relationships among the actors in policy coalitions/networks in the Illinois SCHIP policy process. These relationships of policy coalitions/networks are identified with a series of cluster analyses. For the cluster analyses, I used ORA, which is a dynamic network analysis tool that analyzes and visualizes these networks (http://www.casos.cs.cmu.edu/projects/ora/).

3. Data Analyses

Social Network Analysis (SNA) is a research methodology and a theoretical framework that explains social phenomena with structural and relational features of the networks and actors involved in them. SNA is a powerful way of understanding the relative influences of relevant groups and individual actors and relations between those actors. A social network is basically composed of two components, nodes and relations (Carley, Columbus, & Landwehr, 2013; Wasserman & Faust, 1994). In the study of social networks, the nodes refer to people and the relations that are often called links or ties. SNA provides researchers with tools to examine key concepts, such as actors, relations, and relational ties that play a crucial role in the policy network theory (PNT). Wasserman and Faust (1994) define actors as “discrete individual, corporate, or collective social units” that do not necessarily have the volition or ability to act but given their relational ties to other actors in a process (p. 17). They define relations as
collections of “ties of a specific kind among members of a group (p. 20). Thus, a
relational tie is the social tie that links two actors in a given social network. Unlike
traditional social science research that uses quantified individual attributes or behaviors
as the primary data source, SNA utilizes relational data that describe the relationships
between actors embedded in the network. Relational data can be dichotomous, indicating
the presence or absence of a relationship, or valued, indicating the strength, intensity, or
frequency of a relationship. The relational data may be either symmetrical or
asymmetrical, depending on the reciprocity of the relationship (Wasserman & Faust,
1994).

SNA has a long history in the field of social science. One of the intellectual
sources of social network research is in the sociological tradition of network studies,
which are rooted in Gestalt psychology and the studies of the Manchester anthropologists
and the Harvard structuralists (Berry et al., 2004). The studies of Gestalt psychologists
and the Manchester anthropologists descended from the sociometric models, representing
illustrations of interactions of network relations and structural relationships such as
friendship, information, economic exchange, etc. Major advances in the network analyses
came from the Harvard structuralist tradition in the late 1960s. Their approach provided a
more generalizable and rigorous tools modeling and measuring the roles of individual
actors’ positions in a network and the powers exercised by actors’ within the network
(Berry et al., 2004). Following the Harvard structuralist tradition, Wasserman, one of the
prominent figures in the network analysis, advanced the analytic models of complex
dynamic network, specifically tracing interactions between actors in a network and their
effects on network changes in the course of continuous-time (Wasserman, 1978).
In this study, I assumed that the SCHIP policy process occurs in a pattern of interaction among actors, including government and nongovernment organizations, individual policy actors, and nonprofit organizations. Policy actors in this study are individual persons and organizations. As Laumann and Knoke (1987) mention, organizations and individuals are the core actors at the government level, and public policies are the product of complex interactions among these policy actors, each seeking to influence collectively policy-making decisions. SNA help map the interaction among the actors as a social network of relations.

A. Network Text Analyses: AutoMap

Social network analysis (SNA) has a set of tools capable of analyzing patterns of actor interactions in networks. Computerized textual analysis is a viable method to extract data on the relationships in a policy field from archival data.

Scholars have attempted to apply network text analysis tools to extract and characterize policy networks to the theories and perspectives in the field of public administration and public policy (Van Attelveldt, Kleinnijenhuis, & Ruigrok, 2008; Dickey, 2009). In network text analysis, relations among the concepts in a text are extracted, analyzed, and depicted in network maps (Carley, 1997). Network text analyses can be conducted with the software system that had been developed at Carnegie Mellon University by Kathleen Carley and her colleagues (Carley, 2009, 2013; Diesner & Carley, 2005). This system has two components: Automap, which extracts networks from texts (http://www.casos.cs.cmu.edu/projects/automap), and ORA, which analyzes networks extracted by Automap (http://www.casos.cs.cmu.edu/projects/ora).
The network text analysis tool AutoMap is based on the semantic network analysis approach (Carley et al., 2009). Semantic network analysis assumes that a model of networks of words and relations can be developed by extracting knowledge and language in a certain text context. According to Diesner and Carley (2004), texts can be coded and analyzed as networks of a set of concepts. In texts, there are components of social structure that is regarded as the connected relations among people, organizations, resources, events, locations, and so on. Network text analysis maps the links among these concepts and components in texts, models networks of words and relations, and further constructs a network of linkages (Carley, Columbus, & Landwehr, 2013).

AutoMap conducts the extraction of networks based on the co-occurrence counts of words or word combinations in a fixed window size in texts (e.g., sentence, paragraph, or whole text) (Van Atteveldt, 2008). A window size is the distance of two concepts and determines the span in which connections are made. When generating a meta-network, which includes multiple meta-network categories (i.e., actor, resource, knowledge, location, task, action, etc.), it is important to determine a correct window size. Using a large window size is likely to generate a fully connected group with all links, while using a small window size may result in important links being missed (Carley, Columbus & Landwehr, 2013). In their study, Morçöl, Vasavada and Kim (2013) experimented with window sizes between 20 and 40 and found that the window size 30 was the best size. In the current study, I used the window size 30 to analyze the SCHIP policy networks.

I used AutoMap to extract not only the relations among network actors (individual and organizational actors), but also the knowledge they have (which I interpreted as actors’ beliefs). I analyzed newspaper articles in order to observe key patterns in texts.
such as central policy actors, quotes, and paraphrases as indicators of the SCHIP policy process. AutoMap appears promising to identify these patterns from the texts and extract a model of links and relations between concepts and ideas (Carley, et al., 2013).

**B. Social Network Analyses: ORA**

The software tool for dynamic network analysis that I used in my analyses, ORA, has more capabilities than traditional SNA software (e.g., UCINET). UCINET has been used to analyze the links among actors only or the links between actors and a particular characteristic. In addition to analyzing actor relationships in social networks, as a dynamic meta-network analysis tool, ORA is useful when a researcher analyzes a number of multiple sets of network relations that need to be assessed. ORA is capable of assessing multi-links of networks with linkages with actors, their actions, tasks, knowledge, resources, or locations and visualize the conceptual images of these dynamic networks (Borgatti, Everett, & Johnson, 2013; Carley, 2013; Diesner & Carley, 2004). ORA also can be used to assess changes in networks over time (Carley, Pfeffer, Reminga, Storrick, & Columbus, 2013).

AutoMap develops meta-networks by linking actors and their knowledge, resources, actions, or tasks, and ORA easily can read and visualize these meta-networks. ORA can analyze meta-networks by coding the complex relationships as actors and their resources, actors and their locations, actors and their actions, and so on. The analytical approach of using AutoMap and ORA enables researchers to reconstruct the structural properties of the complex governance networks and the relative positions of the individual and organizational actors who played roles in them.
In this study, I first conducted individual-level analyses. In these analyses, I utilized “Standard Network Analysis” report in ORA, which includes the standard network analysis measures, such as centrality, network size, density, complexity, network levels, and so on. ORA also identified top ten actors based on total degree centrality. Centrality is meaningful in understanding the network structure as the measure refers to an actor’s prominence within a network by summarizing the structural relationships with other actors (Knoke & Yang, 2008). A central actor is simply defined as “one involved in many ties” (Wasserman & Faust, 1994, p. 173). Thus, the top actors I found in the SCHIP policy process are more central in the network in a sense that they have more connections to others.

ORA is also capable of analyzing “meta-networks,” relationships not only among actors but also their knowledge and resources. I adapted my ORA analyses to use the “knowledge” option in the software to analyze the actors’ beliefs. The analysis was conducted by examining systematic maps of the Illinois SCHIP coalitions. I used ORA’s “Locate Subgroups” report in order to identify the subgroups present in the network and find groups of actors and the beliefs those actors hold. Cluster analysis groups individuals or entities into clusters so that entities in the same cluster are more similar to one another than they are to entities in other clusters. Cluster analysis is conducted to maximize the homogeneity of object within the clusters while maximizing the heterogeneity between the clusters. Cluster analysis has been used in a variety of fields ranging from the derivation of taxonomies in biology to psychological classifications based upon personal traits or to segmentation analyses of markets (Hair, Black, Babin, & Anderson, 2009).
I briefly describe the logic of cluster analyses here. In this study, the first task is developing some measure of similarity between each actor to be embedded in the clustering process, SCHIP coalitions. Similarity represents the degree of correspondence among object used in the analysis, and smaller distances indicate greater similarity. Based on the similarity measures of each observation, clusters are formed in a hierarchical manner, which means that two clusters are combined at a time until all observations are in a single cluster. The hierarchical clustering process can be portrayed graphically in several ways. ORA identified the subgroups present in the network using the Newman grouping algorithms. The Newman algorithm is useful to find clusters in networks, specifically large networks (Carley et al., 2013).

ORA showed a series of nested groups for each year in its visualizer. In this study, I compared the observations of clusters shown in the ORA visualizer with the groupings of clusters shown in the hierarchical clustering diagram. The “Locate Subgroups” report creates a hierarchical clustering diagram, which starts with each node as its own group and then combines groups in a hierarchical manner until only one group remains. The hierarchical clustering diagram shows groupings of actors. Given a systematic calculation representing similarities or dissimilarities among a set of n items, the algorithm finds a series of nested partitions of the item. The different partitions are ordered according to decreasing (or increasing) levels of similarity and/or dissimilarity (Hair, Black, Babin, & Anderson, 2009). The algorithm continues in this manner until all items are joined into a single cluster to make the complete partition. Therefore, in analyzing the hierarchical clustering diagram, it is critical to determine the number of clusters to identify meaningful clustering groups.
In this study, I selected only the clustering groups with a meaningful number of actors in them and excluded the groups with insufficient numbers of actors (e.g., only one or two). I compared the number of clustering groups and individual actors of the clusters between the hierarchical clustering diagrams and ORA visualizers for each year. This comparison is meaningful to get the substantial structures that represent the clusters of policy coalitions in the SCHIP policy process.

C. Interpretations of Texts

SNA offers the technical skills to extract relations and visualize networks in a computerized way. However, the quantitative network analysis approach is descriptive in nature and has a limitation in the contexts of relationships. Therefore, the network relations that are extracted and analyzed need to be supplemented by a research’s direct interpretation and inference of texts. A review and interpretation of the texts helps gather specific information about texts and better understand the context of the policy process with greater details. After a series of the network analyses with AutoMap and ORA has been completed, I interpreted the texts directly to understand its contexts. The findings from a series of cluster analyses and my text interpretations can help answer the third general question: How did the policy network characteristics and their evolutions affect the policy changes in the SCHIP policy processes in Illinois?

Additionally, interpretation of texts is necessary to validate the results of data analyses. Using textual data from archival sources is a popular method in social network analysis. However, a major problem is that some words in texts may not directly relevant or may be different in other different contexts. It may cause overlaps or confusing in
interpreting the results of analyses. I went back to the text and re-read the relevant articles to eliminate the possibilities of overlaps or ambiguities in understanding the results.

In this chapter, I presented the overall research design. To better understand the structures of policy networks and their impacts on policies in the case of Illinois, I conducted a series of network text analyses and dynamic network analyses using AutoMap, which extracts networks from texts, and ORA, which analyzes and visualizes networks extracted by Automap. In Chapter 6, I provide the results of the text network analyses and cluster analyses.
CHAPTER 6. RESULTS OF SCHIP NETWORK ANALYSES

In this chapter I present the findings from the network text analyses and the dynamic network analyses of the SCHIP policy process in Illinois. The findings are organized into three sections. In the first section, I discuss the results of my group-level analyses. The structural characteristics of the SCHIP policy networks, including network size, degree of centralization, density, are included in the discussion. In the second section, I describe the results of the individual-level analyses of the SCHIP policy process. I report central actors in the SCHIP policy process and the changes in centrality scores between 1997 and 2007. In the final section, I present sub-group level analyses with the details of cluster analysis results and visual representations for each year.

1. Group Level Analyses

The results of the group-level analyses of the whole networks are presented in Table 6.1 and Figure 6.1. In this study, I discuss two measurements that are most commonly used in studying whole networks: network density and network degree centrality. The first important observation in the Table 6.1 and the Figure 6.1 is that both the density scores and the centralization scores are consistently very low throughout the years. Density is a measure of group cohesiveness. Density relates to the connectivity or linkage and distance from one actor to another, and, therefore, it equals the proportion of links in a network. Density takes on values between 0 and 1 (Wasserman & Faust, 1994). The density scores in this study are low; they vary between the ranges 0.03 and 0.1.
Table 6.1. Results of Group-Level Analyses

<table>
<thead>
<tr>
<th>YEAR</th>
<th># of Articles</th>
<th># of Agents</th>
<th># of Links</th>
<th>Network size</th>
<th>Density</th>
<th>Degree Centralization</th>
</tr>
</thead>
<tbody>
<tr>
<td>1997</td>
<td>7</td>
<td>97</td>
<td>334</td>
<td>0.075</td>
<td>0.062</td>
<td></td>
</tr>
<tr>
<td>1998</td>
<td>16</td>
<td>108</td>
<td>498</td>
<td>0.106</td>
<td>0.053</td>
<td></td>
</tr>
<tr>
<td>1999</td>
<td>21</td>
<td>122</td>
<td>452</td>
<td>0.068</td>
<td>0.075</td>
<td></td>
</tr>
<tr>
<td>2000</td>
<td>18</td>
<td>90</td>
<td>264</td>
<td>0.051</td>
<td>0.055</td>
<td></td>
</tr>
<tr>
<td>2001</td>
<td>36</td>
<td>176</td>
<td>902</td>
<td>0.069</td>
<td>0.03</td>
<td></td>
</tr>
<tr>
<td>2002</td>
<td>11</td>
<td>94</td>
<td>352</td>
<td>0.075</td>
<td>0.093</td>
<td></td>
</tr>
<tr>
<td>2003</td>
<td>15</td>
<td>132</td>
<td>426</td>
<td>0.046</td>
<td>0.041</td>
<td></td>
</tr>
<tr>
<td>2004</td>
<td>8</td>
<td>82</td>
<td>432</td>
<td>0.134</td>
<td>0.061</td>
<td></td>
</tr>
<tr>
<td>2005</td>
<td>55</td>
<td>276</td>
<td>1864</td>
<td>0.038</td>
<td>0.02</td>
<td></td>
</tr>
<tr>
<td>2006</td>
<td>31</td>
<td>198</td>
<td>814</td>
<td>0.044</td>
<td>0.034</td>
<td></td>
</tr>
<tr>
<td>2007</td>
<td>43</td>
<td>248</td>
<td>1556</td>
<td>0.043</td>
<td>0.03</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>261</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Figure 6.1. Network Density and Centralization of SCHIP Policy Networks

With the exception of the year 2004, the year when a limited number of actors were involved in the No-Growth budget issue, the density scores are constantly low. The low density measure in my analyses are predictable because the Illinois SCHIP
networks are large; the network size ranges between 264 and 1,864. It is said that density score increases as the group size decreases (Wasserman & Faust, 1994). The increase in the number of actors and articles covering those actors and their activities indicates that the network size also increases.

Degree centralization scores also shows a similar pattern and the scores overall are low; centrality varies between 0.02 and 0.09. The centralization is a measure of how a central actor is in contact with all others, and it is on the scale between 0 and 1. ORA can generate the centrality on the three levels that are most widely used: total degree, closeness, and betweenness. Degree centrality measures the extent to which a node (e.g., an actor) connects to all other nodes in a social network. Actor degree centrality measures not only each node’s connectivity to other nodes but also the size of the network. If the network is larger, the maximum possible degree centralization is higher. Closeness centrality concerns how an actor is near to the other actors in a network and how quickly an actor can interact with others. Betweenness centrality measures how the actors control or mediate the relations between dyads that are not directly connected. Betweenness centrality stresses that an actor who is intermediary in a sense he or she links two actors within a network (Knoke & Freeman; Wasserman & Faust, 1994).

I chose to interpret total degree centrality for our analyses because it is a useful indicator showing whether there are actors who have more connections than others in the policy networks I analyzed. If the centralization score is high, this means that there are few central actors in a network (Wasserman & Faust, 1994). If it is high, there is one of few central actors in a network. Based on the results in Table 6.1 and Figure 6.1, I can answer to my first specific research question (1-b) about what the structural
characteristics of the Illinois SCHIP networks as measured in network size, density, and centralization. The SCHIP policy networks of Illinois had low density and low centralization in the years I studied. The network size was large and there were not one or few central actors. Rather, as presented in the following results, it is more likely to have a wide array of actors who were involved in the policy process.

2. Individual Level Analyses

By using the “Standard Network Analysis” report generated in ORA, I conducted the individual-level analyses to answer the second specific research question (2-a): who were most central in these policy networks and how central actors changed over time. The “Standard Network Analysis” report in ORA provides useful information to understand networks measures at the individual-level (e.g., total degree centrality) as well as the group-level (e.g., density, number of agents, network levels, and so on). Table 6.2 presents the rankings of the top ten actors based upon their total degree centrality scores in each year. I used the total degree centrality measure, since it is based on the number of connections each actor has in the network; in that sense it helps determine who the most important actors are in the network. Those actors with the most access or most control will be the most central in the network. Actors with large degree of centrality scores are recognized by others as a major channel of relational information in the network occupying a central position (Wasserman & Freeman, 1994).
As shown in Table 6.2, there were consistently central actors in the 11 years I studied: Illinois governors, Jim Edgar (1997-1999), George Ryan (1999-2003), and Rod Blagojevich (2003-2007). Since the enactment of SCHIP in Illinois, governors (colored in green) were key initiators of the Illinois children’s health programs, such as KidCare (1998) and All Kids (2006). The governors are ranked constantly either the first or the second for most of the years.

Both IL (Illinois) Democrats (colored in blue) and IL (Illinois) GOP (colored in yellow) were among the top actors throughout the years, but they were not in the picture from 1999-2001, the initial years of IL SCHIP implementation. The exceptions (1999-
2001) are somewhat expected because the top priority was exclusively the outreach issue that state and local governments (i.e., Illinois Department of Public Aid) played central roles in executing the SCHIP enrollment procedures. Except the years, my reading of the newspaper articles indicate that IL Democrats and IL GOP were involved in a series of controversial issues over SCHIP implementation or expansion throughout the years I studied.

IL (Illinois) Department of Public Aid (colored in red) was among the top actors in the early years, 1998-2002, of SCHIP implementation, but it declined in the rankings and disappeared after 2003. In those early years of SCHIP in Illinois, Illinois Department of Public Aid played a key role in the state’s top priority: how to successfully increase the SCHIP enrollment rate in at the state level. Illinois Department of Public Aid, in conjunction with community-based, nonprofit organizations (e.g., RainbowPUSH, United Power, Francis George) worked at the community level to educate people about KidCare and encourage families to apply. Illinois Department of Public Aid also developed ties with other local governments, such as Dupage County Health Department, Cook County Bureau of Health Services, and Paul Vallas of Chicago Public Schools for the outreach efforts during the years.

It is noteworthy that there are federal actors among the top central actors in my analyses: Presidents and Health and Human Services Secretary. President Clinton in 1997 and President Bush 2007 played critical roles in legally authorizing and reauthorizing the SCHIP. SCHIP was authorized in the year of 1997 and reauthorized in 2007. Policy actors and their activities during those years were sensitive to the federal actors’ influence. Tommy Thompson, the Health and Human Services Secretary, was an
important actor in 2002, when Illinois requested the financial support for the KidCare expansion from Health and Human Services.

3. Sub-Group Level Analyses

I conducted a series of cluster analyses to find out if there were identifiable groupings of actors and how the groupings were formed and changed over the years. The purpose of my cluster analyses was to test the ACF’s prediction: Individual actors in a policy subsystem form an advocacy coalition based upon their beliefs. The ACF assumes that actors with similar beliefs coordinate their behavior and engage in networks to influence policy processes and outcomes (Sabatier & Jenkins-Smith, 1993).

The cluster analysis function in ORA is capable of linking actors to their beliefs. In order to extract the actor and belief relationships, I conducted cluster analyses with ORA’s “Locate SubGroups” report function. I used the grouping (cluster analysis) function in ORA, particularly the Newman grouping algorithm. The Newman algorithm is a hierarchical clustering algorithm: It starts with each node as its own group and then combines groups in a hierarchical manner until only one group remains. The Newman algorithm is useful to find clusters in networks, specifically large networks (Hair, Black, Babin, & Anderson, 2010). The “Locate SubGroups” report provides a hierarchical clustering diagram that shows a number of distinctive clusters of individual actors. I adapted my ORA analyses to use the “knowledge” option in ORA to analyze the actors’ beliefs.

The results of the sub-group level analyses are presented in three ways. The first one is the visualizations of meta-networks that were generated by ORA (Figures 6.2 –
In the visualization of the clusters in each year, each dot in a chart represents a cluster of actors (red) and their beliefs (green); the sub-coalition groupings are marked with pink colors.

The second one is the representation with hierarchical clustering diagrams (Figure 6.2 – 6.23) produced by ORA for each year. In order to find the most meaningful clusters, I compared the groupings shown in the ORA visualizations with the hierarchical clustering groups. The hierarchical clustering technique is widely used in social network analyses. However, this technique has a disadvantage: Determining the number of clusters is often arbitrary because no standard objective selection procedure exists, and it solely depends on a researcher’s interpretation. One viable solution to this problem is that researchers compare two or more cluster analysis results to make their final decisions (Hair, Black, Babin, & Anderson, 2010; Wasserman & Faust, 1994). By comparing the hierarchical clustering diagrams and the visualizations of ORA meta-networks, I could find the most representative clusters from the data.

The third way is to provide the detailed interpretations about the coalitions of the SCHIP policy process for each year (see Table 6.3 – 6.13). After tabulating the results of the sub-group analyses (cluster of actors and beliefs) based upon the ORA meta-networks and hierarchical clustering, I re-read the newspaper articles to supplement the tabular information with contextual information.

The findings for each year are presented separately in the following subsections.
3.a: Year 1997

Table 6.3. Clusters of Actors and Beliefs in 1997

<table>
<thead>
<tr>
<th>1997</th>
<th>Pro-Issue Coalition 1</th>
<th>Pro-Issue Coalition 2</th>
<th>Pro-Issue Coalition 3</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>[Pro-Governor/IL Legislature Coalition]</td>
<td>[President/IL GOP/IL Democrats Coalition]</td>
<td>[Pro-State Agency/Nonprofit Coalition]</td>
</tr>
</tbody>
</table>
| Actors | Jim Edgar  
Stephen Schnorf  
Glenn Poshard  
Eric Robinson  
Dave Syverson  
Tom Cross | IL Democrats  
IL GOP  
Bill Clinton  
John Sweeney(Labor Org) | Dean Schott  
IL DPA(Department of Public Aids)  
Molly Bartlett  
Dupage HD(health Department) |
| Belief | Hcexpansion (healthcare expansion)  
Welfare  
Bureaucracy | Nationalizedhc (nationalized healthcare)  
Healths ecurity  
Universalhc (universal healthcare)  
Health reform  
Safety net  
Devolution  
Privatehc (private healthcare)  
Biggovt (big government) | N/A |
| Summary | SCHIP authorization at the Federal Level |
Figure 6.2. Clusters of Actors and Beliefs in 1997

Figure 6.3. Hierarchical Clustering Diagram in 1997
As presented in Figure 6.2 and 6.3 the cluster analyses using the Newman algorithm in ORA show that there were three distinctive clusters of individual actors in 1997. Figure 6.2 visualizes the three clusters of actors and their beliefs, and Figure 6.3 represents the hierarchical clustering with three partitions. Based on my interpretation of the texts published in 1997, I tabulated the three clusters and summarized the significant event of the year that might affect the activities and beliefs of the actors within the clusters (Table 6.3). With the Federal Balanced Budget Act in 1997, which appropriated $24 billion in new federal funds over six years for states’ children’s health initiatives, the state of Illinois started to make efforts to expand its existing Medicaid programs, subsidize private health insurance, or create its separate children’s health care program. All of these three groups are categorized as Pro-SCHIP Coalitions because they are in favor of the bipartisan issue, SCHIP implementation in Illinois. The Pro-SCHIP Coalitions are divided into three sub-coalitions: Pro-Issue Coalition 1, Pro-Issue Coalition 2, and Pro-Issue Coalition 3. Actors in each coalition are grouped based on their shared beliefs, but no belief was found in Pro-Issue Coalition 3.

The Pro-Issue Coalition 1 includes actors such as Stephen Schnorf, (Edgar’s budget director) Tom Cross, Dave Syverson, (Senator, R) Jim Edgar (Governor, R), Glenn Poshard (Representative, D), and Eric Robinson (Edgar’s spokesman). Most of these actors are those in the administration or department agency. In December 1997, Governor Jim Edgar announced that they would expand health insurance to more state children though he hesitated for KidCare (Illinois CHIP). Governor Edgar was concerned about bureaucratic issues such as enrollment or federal and state relations. Senator Syverson, a member of Edgar’s new task force and chairman of the Senate Committee on
Public Health and Welfare, supported Edgar’s efforts on the SCHIP. Representative Poshard aggressively pushed Edgard administration to quickly start off the Illinois SCHIP. This governor and legislature coalition was based on their shared beliefs such as “welfare”, “healthcare expansion,” and “bureaucracy”.

The Pro-Issue Coalition 2 includes the largest number of actors, including IL Democrats, IL GOP, President Bill Clinton, and John Sweeney, president of the AFL-CIO, which is one of the influential labor organizations in Illinois. As we reviewed in the previous chapters, President Clinton was a key player who initiated the SCHIP in 1997. With the announcement of President Clinton at the federal level, Illinois state started to address the issue of SCHIP. IL Democrats and IL GOP were in favor of the bipartisan issue of expanding children’s health insurance, although they were in debates regarding how to spend the SCHIP money and how to create a state-level CHIP. IL Democrats preferred to raise the amount of income a family could earn and expand the enrollment bar based on their beliefs, “healthcare reform,” “health security,” and “safety net.” On the contrary, IL GOP wanted to give states their preferences in using subsidies for health expansion program sticking to their policy positions that were against ““big government,” “nationalized healthcare,” “universal healthcare,” “devolution,” “private healthcare.”

The Pro-Issue Coalition 3 consists of Dean Schott (Department of Public Aid spokesman), Dupage Health Department, IL Department of Public Aid, and Molly Bartlett (IL Caucus for Adolescent Health), but there was no belief attached to this coalition. In order to find out the rationale for the Pro-Issue Coalition 3, I went back to interpret the texts. The actors were grouped in this coalition, as there was a key issue that
the actors commonly dealt with: How to successfully implement Illinois CHIP at the state level.

3.b: Year 1998

Table 6.4. *Clusters of Actors and Beliefs in 1998*

<table>
<thead>
<tr>
<th>1998</th>
<th>Pro-Issue Coalition 1</th>
<th>Pro-Issue Coalition 2</th>
<th>Pro-Issue Coalition 3</th>
</tr>
</thead>
</table>
| Actor | [Pro-Governor / IL Legislature Coalition]  
Jerry Stermer  
Jim Edgar  
Lou Lang  
IL DPA  
IL Senate GOP  
Jackie Garner  
Bill Clinton  
Barbara Currie | [Pro-IL GOP / Local Government Coalition]  
IL GOP  
Loleta Didrickson  
Peter Fitzgerald  
Moseley Braun  
Public Schools  
Richard Daley | [Pro-Politicians Coalition]  
Glenn Poshard  
George Ryan |
| Belief | Welfare  
Emplyerhc (employer-based healthcare)  
Equity  
Unvierrsalthc (universal healthcare) | Hecxpansion (healthcare expansion) | N/A |
| Summary | KidCare Implementation |
Figure 6.4. Clusters of Actors and Beliefs in 1998
In 1998, I found three clusters of Pro-SCHIP Coalition. Childcare was one of the top bipartisan priorities of this year. Governor Jim Edgar assembled a task force of legislators and representatives from the business, health, child advocate and insurance communities to make recommendations to create a Children’s Health Insurance Program. The Republican members of the House and Senate advocated for a program that provided health coverage to qualified children without disrupting the current employer-based health insurance system. From this task force the IL General Assembly crafted House Bill.
705, known as *Kidcare*. Kidcare had the unanimous support from both the IL Senate and the IL House of Representatives. This Pro-SCHIP Coalition was divided into the three sub-coalitions by their beliefs (see Table 6.4. and Figure 6. 4).

Pro-Issue Coalition 1 includes various actors from Governor Edgar’s Administration and legislative actors who were in favor of Edgar’s a bipartisan agreement, KidCare expansion. Jerry Stermer (President of Voices for IL Children), House Majority Leader Barbara Currie (D) and Representative Lou Lang were supportive for Governor’s plan, KidCare expansion. These actors’ beliefs (“universal healthcare,” “equity,” “welfare,” “employer healthcare system”) were attached to the cluster. Pro-Issue Coalition 2 consists of actors mostly from local government and Il GOP, including Senator Moseley-Braun, Republican Senator Candidates, Loleta Didrickson and Peter Fitzgerald, Chicago Mayor Richard Daley, and Public Schools. These actors were interested in general issues regarding children’s welfare, such as quality health care for children. The beliefs binding this coalition were “welfare” and “healthcare expansion.” Pro-Issue Coalition 3 is about governor candidates Glenn Posoard (US Rep) and George Ryan (Secretary of State) who were for SCHIP expansion. No beliefs were attached to this coalition. From my interpretation of the texts, I found that they interacted each other to show their policy positions, support for the establishment of KidCare, in 1998.
### 3.c: Year 1999

Table 6.5. *Clusters of Actors and Beliefs in 1999*

<table>
<thead>
<tr>
<th>1999</th>
<th>Pro-Issue Coalition 1</th>
<th>Pro-Issue Coalition 2</th>
<th>Pro-Issue Coalition 3</th>
<th>Pro-Issue Coalition 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Actor</td>
<td>[Pro-Governor / Local Government Coalition]</td>
<td>[Pro-Local Government Coalition]</td>
<td>[Pro-Nonprofit / State Agency Coalition]</td>
<td>[Pro-Politicians Coalition]</td>
</tr>
<tr>
<td>Summary</td>
<td>Enrollment Increase</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Figure 6.6. Clusters of Actors and Beliefs in 1999
Since the launch of the Illinois CHIP, KidCare, the enrollment issue was a priority among all policy actors who were involved in the SCHIP policy process. In April 1999, supported by the new governor, George Ryan, the Illinois Department of Public Aid began to foster community-based outreach efforts by partnering with public schools and community-based nonprofit organizations. The cluster analyses found four clusters of actors and their attached beliefs. These clusters can be loosely categorized as Pro-SCHIP Coalition because they all agreed upon the increase of the SCHIP enrollment (Table 6.5
More specifically, in Pro-Issue Coalition 1, Governor George Ryan’s (including Dan Culloton, Ryan’s Spokeman) high priority was to increase enrollment in KidCare. Paul Vallas (CEO of Public Schools) and Mayor Daley were in cooperation with KidCare outreach efforts. The Chicago Public Schools became a partner in the outreach effort. Nongovernmental organizations, including churches, community groups, labor unions and health care providers, also were asked to help contact eligible families.

Pro-Issue Coalition 2 focused on KidCare application process and implementation. This effort could be done by cooperation with both State Agency and Nongovernment organizations, such as Ann Patla (Director of IL Department of Public Aids), United Way officers, IL Chambers of Commerce, and Bill Doran (Principal at Perry Elementary School in Carpentersville) to encourage families to apply for KidCare. Robyn Gabel (Executive Director of the IL Maternal and Child Health Coalition) also attempted to spread KidCare among large minority populations. KidCare had implementation problems such as staff shortage, no publicity, lengthy and complex application and enrollment processes. The bureaucratic tangles and delays in application processes was a big problem to both target population and officials who implement the program. The actors in this coalition shared the belief of “bureaucracy.” A belief “private healthcare” frequently presented in both Pro-Issue Coalition 1 and 2 should be cautiously interpreted from the texts. The state and local government actors showed their opposition to private employer healthcare system.

A key issue for Pro-Issue Coalition 3, mostly consisting of non-profit organizations (e.g., Rainbow PUSH, Rainbow PUSH President Jesse Jackson (Representative, D) and its vice president James Meeks, was an outreach effort for
KidCare application as well. The beliefs attached to this coalition were “welfare” and “responsibility.”

Pro-Issue Coalition 4 includes initiators of KidCare, Governor Jim Edgar who proposed KidCare and Representative Sonia Silva who sponsored the bill to booster KidCare enrollment. KidCare lawmakers such as Representative Silva proposed a legislation aiming to improve outreach efforts for the KidCare program.

3.d: Year 2000

Table 6.6. Clusters of Actors and Beliefs in 2000

<table>
<thead>
<tr>
<th>2000</th>
<th>Pro-Issue Coalition 1</th>
<th>Pro-Issue Coalition 2</th>
<th>Pro-Issue Coalition 3</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>[Pro-Governor / State Agency / Nonprofit Coalition]</td>
<td>[Pro-State Agency / IL Legislature Coalition]</td>
<td>[Pro-Nonprofit Organizations Coalition]</td>
</tr>
<tr>
<td>Actors</td>
<td>George Ryan</td>
<td>Ann Patla</td>
<td>Michael Savage</td>
</tr>
<tr>
<td></td>
<td>Wanda Taylor</td>
<td>Cook BHS</td>
<td>United Power</td>
</tr>
<tr>
<td></td>
<td>Nancy Gier</td>
<td>Donne Trotter</td>
<td>Francis George</td>
</tr>
<tr>
<td></td>
<td>Eric Robinson</td>
<td>Jane Longo</td>
<td>Paul Vallas</td>
</tr>
<tr>
<td></td>
<td>Rita Grover</td>
<td>Joyce Jackson</td>
<td>IL DPA (IL Department of Public Aids)</td>
</tr>
<tr>
<td>Beliefs</td>
<td>N/A</td>
<td>Welfare</td>
<td>N/A</td>
</tr>
<tr>
<td>Summary</td>
<td>Enrollment Increase</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Figure 6.8. Clusters of Actors and Beliefs in 2000
The interest in the SCHIP enrollment increase continued in 2000. Most coalition actors made efforts to increase the number of enrollments. As seen in Table 6.6 and Figure 6.8, three Pro-Issue Coalitions that supported the outreach increase are observed and no competing coalitions exist this year. Pro-Issue Coalition 1 consists of Governor George Ryan Administration (including Wanda Taylor, Spokeswoman for Ryan and Eric Robinson, Spokesman for Ryan), state agency, and nonprofit organization. Governor Ryan’s focus on KidCare enrollment continued. The size of the state’s KidCare program

Figure 6.9. Hierarchical Clustering Diagram in 2000
tripled to more than 95,000 under Governor Ryan shortly after he took office. Governor Ryan encouraged communities and health-care providers to help sign up eligible families. Rita Grover of the Grassroots Collaborative, a coalition of community groups, criticized low enrollment in KidCare program. Nancy Gier, Spokeswoman of the DuPage County Health Department, was mentioned as a successful example of KidCare enrollment.

Pro-Issue Coalition 2 is mostly about state agency actors, such as Joyce Jackson, Spokeswoman of IL Department of Public Aids, Ann Patla, Director of IL Department of Public Aids, Cook County Bureau of Health Services, DuPage County Health Department, and Longo, chief of the KidCare bureau. They took aggressive action to increase in KidCare enrollment with a media outreach campaign to increase the number of populations enrolled in KidCare. Senator Trotter was in favor of KidCare. The actors in this coalition share the belief system, “welfare,” in their activities.

Pro-Issue Coalition 3 consists of a coalition of health-care, religious and community groups which are grouped for an initiative to reduce the number of uninsured in Chicago (e.g., expanding the existing KidCare to include adults). United Power for Action and Justice, a coalition of health-care, religious and community groups, launched its first initiative to reduce the number of uninsured in the Chicago area. Michael Savage, chairman of the coalition made efforts to get those who are eligible for government programs enrolled into them, and to link those who are not eligible for public benefits to community health centers or safety net providers. Called the Gilead Center planned an aggressive outreach campaign through multilingual advertising and churches to find Cook County’s uninsured. Cardinal Francis George of the Archdiocese of Chicago and Chicago Public Schools’ chief Paul Vallas joined executives from the medical, business
and labor communities to launch an awareness campaign. It is interesting that this year, two of three coalitions had no beliefs attached to the actors. I re-read the texts and found that the actors in Pro-Issue Coalitions 1 and 3 saw that the statewide outreach efforts of the SCHIP were not value-laden. The policy actors in these sub-coalitions were clustered around the outreach issue they were dealing with, not shared beliefs.

3.e: Year 2001

Table 6.7. Clusters of Actors and Beliefs in 2001

<table>
<thead>
<tr>
<th>2001</th>
<th>Pro-Issue Coalition 1</th>
<th>Pro-Issue Coalition 2</th>
<th>Pro-Issue Coalition 3</th>
<th>Neutral Coalition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Actors</td>
<td>[Governor / IL Legislature Coalition]</td>
<td>[Pro-IL Legislature / Local Government Coalition]</td>
<td>[Pro-President / IL Politicians Coalition]</td>
<td>[RainbowPUSH No-Bid Contract Scandal Coalition]</td>
</tr>
<tr>
<td></td>
<td>Michael Madigan</td>
<td>Paul Vallas</td>
<td>Bill Clinton</td>
<td>Jesse Jackson</td>
</tr>
<tr>
<td></td>
<td>James Philip</td>
<td>Public Schools</td>
<td>Rahm Emanuel</td>
<td>Rainbow Push</td>
</tr>
<tr>
<td></td>
<td>George Ryan</td>
<td>Sara Feigenholtz</td>
<td>Rod Blagojevich</td>
<td>Eric Robinson</td>
</tr>
<tr>
<td></td>
<td>Barack Obama</td>
<td>David Sullivan</td>
<td></td>
<td>Steve Rauschenberger</td>
</tr>
<tr>
<td></td>
<td>Wanda Taylor</td>
<td>Eileen Lyons</td>
<td></td>
<td>IL DPA</td>
</tr>
<tr>
<td></td>
<td>Lee Daniels</td>
<td>IL AFP</td>
<td></td>
<td>Janice Mathis</td>
</tr>
<tr>
<td></td>
<td>Emil Jones</td>
<td>Tom Cross</td>
<td></td>
<td>Jackie Garner</td>
</tr>
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<td></td>
<td>Dan Culloton</td>
<td>John Bouman</td>
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<td>United Power</td>
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<td></td>
<td>US DHHS</td>
</tr>
<tr>
<td></td>
<td>IL House GOP</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>IL House Democrats</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Beliefs</td>
<td>Hcexpansion (healthcare expansion)</td>
<td>Hcexpansion (healthcare expansion)</td>
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<td>Welfare Responsibility</td>
</tr>
<tr>
<td></td>
<td>Equity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Summary</td>
<td></td>
<td></td>
<td></td>
<td>FamilyCare Expansion</td>
</tr>
</tbody>
</table>

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Figure 6.10. Clusters of Actors and Beliefs in 2001
Since around the end of the year 2000, Illinois state government and legislators continued a debate over expanding KidCare program to include adults. The nonprofit organizations (e.g., United Power for Action) proposed to change the program’s name to “Family Care.” As a result of these efforts, Governor George Ryan proposed the Family Care bill (expanding the KidCare program to working parents). Pro-Issue Coalition 1 consisting of Governor’s Administration actors and Illinois Legislatives gave their attention to the Family Care bill passage (Table 6.7 and Figure 6.10). While Senator Obama, Senate Democratic leader Emil Jones, and Representative Lee Danial supported the Governor’s plan, with regards to more expenditure for Family Care, House Speaker
Michael Madigan (D) and Senate President James Pate Philip challenged the Governor Ryan’s spending priorities for the reason of state budget shortage. The Family Care centered on the policy issue throughout the year including most Illinois Legislative actors (both Illinois GOP and Illinois Democrats). The actors were grouped with the beliefs, “safety net,” “equity,” and “healthcare expansion.”

Pro-Issue Coalition 2 includes supporters for the Family Care health insurance bill with their belief “healthcare expansion.” There were mostly Illinois legislative members and local government, including John Bouman of the National Center on Poverty Law, Representatives Sara Feighenbols (D-Chicago) and Eileen Lyons (R-La Grange), Senators David Sullivan (R-Mount Prospect) and Lisa Madigan (D-Chicago), Chicago Public Schools Director Paul Vallas, as well as the representatives of Blue Cross/Blue Shield, the AFL-CIO, and the Illinois Academy of Family Physicians.

Pro-Issue Coalition 3 includes strong supporters for SCHIP expansion at both the federal and state levels. They were President Clinton, IL Representatives, Rahm Emanuel and Rod Blagojevich. Though this cluster has no specific belief attached to it, the actors closely interacted each other to lead the issue of the SCHIP expansion.

It is interesting that a neutral coalition is observed in 2001. The Neutral Coalition includes actors who were involved in the Rainbow PUSH scandal of no-bid contract from Ryan Administration to promote KidCare. They are Eric Robins (Spokesman for Ryan), Jesse Jackson (President of Rainbow PUSH), Senator Steve Rauschenberger (Chairman of the Senate Appropriations Committee), and Jackie Garner (Public Aid Director). They are neutral in a sense that the coalition actors show no specific pro- or against-preference to a given SCHIP issue (e.g., FamilyCare expansion). They were coalesced based upon
the belief systems such as “welfare” regarding SCHIP enrollment efforts and “responsibility” of the scandal.

3.f: Year 2002

Table 6.8. Clusters of Actors and Beliefs in 2002

<table>
<thead>
<tr>
<th>2002</th>
<th>Pro-Issue Coalition 1</th>
<th>Pro-Issue Coalition 2</th>
<th>Against Coalition</th>
<th>Neutral Coalition</th>
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<tbody>
<tr>
<td>Actors</td>
<td>[Pro-Governor/Federal &amp; State Agency Coalition]</td>
<td>[Pro-IL Democrats Coalition]</td>
<td>[Against-President/For-Profit Org Coalition]</td>
<td>[Pro-Executive Coalition]</td>
</tr>
<tr>
<td>George Ryan</td>
<td>IL Democrats</td>
<td>George Bush</td>
<td>IL DPA (IL Department of Public Aids)</td>
<td></td>
</tr>
<tr>
<td>Ken Robbins</td>
<td>Patrick Quinn</td>
<td>Joseph Scheidler</td>
<td>Ellen Feldhausen</td>
<td></td>
</tr>
<tr>
<td>Tommy Thompson</td>
<td>Rod Blagojevich</td>
<td>Dave Syverson</td>
<td>Bill Holland</td>
<td></td>
</tr>
<tr>
<td>Dan Hynes</td>
<td>Jim Ryan</td>
<td>Public Schools</td>
<td>Jackie Garner</td>
<td></td>
</tr>
<tr>
<td>Judy Topinka</td>
<td>Paul Vallas</td>
<td></td>
<td></td>
<td></td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Beliefs</th>
<th>Hcexpansion (healthcare expansion)</th>
<th>Universalhc (universal healthcare)</th>
<th>Welfare</th>
<th>N/A</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Cooperation</td>
<td>Bureaucracy</td>
<td>Flexibility</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Health security</td>
<td>Incremental</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Responsibility</td>
<td>(incremental approach to healthcare system)</td>
<td></td>
<td></td>
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</table>

Summary | KidCare Expansion |
Figure 6.12. Clusters of Actors and Beliefs in 2002
Figure 6.13. Hierarchical Clustering Diagram in 2002

The key issue in 2002 was the expansion of KidCare program (IL SCHIP) to cover their parents as well as children. KidCare became FamilyCare expanding medical benefits for poor IL children to cover their parents as well in September 2002. As shown in Table 6.8 and Figure 6.12, the year 2002 showed a wide range of the four distinctive coalitions including competing pro- and against- coalitions as well as a neutral coalition. As the Illinois SCHIP expansion was a top priority among policy actors, and the policy processes increasingly became complicated, this trend of competing coalitions was found
from 2002 throughout 2006. The Pro-SCHIP Coalition split to two subset coalitions: Pro-Issue Coalition 1 and Pro-Issue Coalition 2. Pro-Issue Coalition 1 includes IL governor George Ryan (and Ryan Spokesman Ken Robbins) and U.S. Health and Human Services (HHS) Secretary Tommy Thompson who worked together to expand KidCare. HHS Secretary Thompson approved the federal funding of $24 million in its first year for the Illinois new program that provides health care to an additional 80,000 low-income parents. Comptroller Dan Hynes and Treasurer Jody Topinka agreed upon Ryan’s $1 billion short-term borrowing program which helped the state pay overdue bills – mainly from health-care providers. The beliefs attached to this cluster were “cooperation,” “health security,” “healthcare expansion,” and “responsibility.”

Pro-Issue Coalition 2 is those who were strongly in favor of children issue, specifically offering universal health insurance. Not surprisingly, Republican Jim Ryan who run for governor, and Democrats Patrick Quinn, who run for lieutenant governor, and Rod Blagojevich, who run for governor, came out strongly in favor of children in a gubernatorial forum on children's issues. Besides these gubernatorial candidates, Paul Vallas of Chicago Public Schools was a key actor in supporting KidCare expansion. Unlike those who were strong supporters of Pro-Issue Coalition 1, Pro-Issue Coalition 2 showed respectively moderate beliefs such as an “incremental approach” to healthcare expansion and were concerned about the nature of “bureaucracy” in the healthcare reform.

In this year, an Against Coalition, consisting of both President Bush and Joseph Scheidler (Director of the Chicago-based Pro-Life Action League) was found. The Against-Coalition focused on the issue of extension of SCHIP funds to developing
embryos and fetuses. Since the coverage of SCHIP extended to developing embryos and fetuses, those actors were not strong supporters for the SCHIP expansion (interpreted as the belief “welfare”).

A neutral coalition was formed in 2002 as well. The neutral coalition consisted of actors such as Ellen Feldhausen (Department of Public Aid Spokeswoman), Jackie Garner (Director of Department of Public Aids), and Bill Holland (Auditor General). There were no beliefs attached to these actors this year, but they were grouped based on their policy function of implementing and auditing the KidCare program.

3.g: Year 2003

Table 6.9. Clusters of Actors and Beliefs in 2003

<table>
<thead>
<tr>
<th>2003</th>
<th>Pro-Issue Coalition 1</th>
<th>Pro-Issue Coalition 2</th>
<th>Against Coalition</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>[Governor / IL Legislature Coalition]</td>
<td>[Pro-Federal/State Agency/Health Organizations Coalition]</td>
<td>[Against-Legislature / Executive Coalition]</td>
</tr>
<tr>
<td></td>
<td>Rod Blagojevich</td>
<td>Il DPA(IL Department of Public Aids)</td>
<td>Michael Madigan</td>
</tr>
<tr>
<td>Actors</td>
<td>Emil Jones</td>
<td>Mike Claffey</td>
<td>Melissa Merz</td>
</tr>
<tr>
<td></td>
<td>George Ryan</td>
<td>Barry Maram</td>
<td>Jesse White</td>
</tr>
<tr>
<td></td>
<td>Frank Watson</td>
<td>Blanca Leon</td>
<td>Lisa Madigan</td>
</tr>
<tr>
<td></td>
<td>Donne Trotter</td>
<td>US DHHS(US Department of Health and Human Services)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Jim Watson</td>
<td></td>
<td></td>
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<tr>
<td>Beliefs</td>
<td>Hcexpansion(healthcare expansion)</td>
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<tr>
<td>Summary</td>
<td>KidCare &amp; FamilyCare Expansion</td>
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</tr>
</tbody>
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Figure 6.14. Clusters of Actors and Beliefs in 2003
In 2003, Illinois government, like other states, suffered from fiscal crisis. However, Governor Rod Blagojevich attempted to expand two existing programs, FamilyCare and KidCare. For the Early Childhood Block Grant, Governor Blagojevich proposed to expand state’s KidCare and FamilyCare, which cover medical expenses for low-income children and families not eligible for Medicaid. It seemed optimistic for the governor as Democrat Governor and Democrats controlled both the General Assembly and the governor’s office. Senate President Emil Jones and House Speaker Michael
Madigan cooperated with Blagojevich. The new legislation, estimated to cost the state $48 million in fiscal 2004, extended eligibility for children's health insurance to families with annual incomes up to $30,516 or twice the federal poverty level. Senator Republican leader Frank Watson, Representative Jim Watson (R), and Senator Donne Trotter (D) were critical to Governor’s plan and raised questions about how the new revenues would be spent in the governor’s budget. Pro-Issue Coalition 1 included diverse actors who had the beliefs among these legislative members and governor, “healthcare expansion” vs. “private healthcare” (Table 6.9 and Figure 6.14).

Pro-Issue Coalition 2 includes the actors of federal and state agencies, Mike Claffey (spokesperson for Illinois Department of Public Aid), Barry Maram (Director of Department of Public Aid), and HHS. Their interests centered on the CHIP implementation. Blanca Leon of the IL Maternal and Child Health Coalition was also in favor of the CHIP expansion. In a sense that all actors in Pro-Issue Coalition 2 made a close relationship to support the FamilyCare Expansion, they can be called as a pro-coalition. No belief was observed in this coalition.

Against Coalition in this year consists of legislative and executive actors, House Speaker Michael Madigan, Melissa Merz, who is Madigan Spokeswoman, Attorney General Lisa Madigan, and Secretary of State Jesse White. From my analysis of the news articles about this coalition, they were in line with the belief, “anti-healthcare expansion”. Considering the economy downfall and strict state budget, the Against Coalition actors are considered as key actors who declined SCHIP expansion in general.
### 3.h: Year 2004

Table 6.10. *Clusters of Actors and Beliefs in 2004*

<table>
<thead>
<tr>
<th>2004</th>
<th>Pro-Issue Coalition 1</th>
<th>Pro-Issue Coalition 2</th>
<th>Pro-Issue Coalition 3</th>
<th>Against Coalition</th>
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<tbody>
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<td><strong>Actors</strong></td>
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<td>[Pro-State Agency Coalition]</td>
<td>[Pro-IL Democrats Coalition]</td>
<td>[Against-IL Legislature Coalition]</td>
</tr>
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<td>Rod Blagojevich</td>
<td>Barry Maram</td>
<td>Barack Obama</td>
<td>IL Senate GOP</td>
</tr>
<tr>
<td></td>
<td>Michael Madigan</td>
<td>IL DPA (IL Department of Public Aids)</td>
<td>Dick Durbin</td>
<td>Patty Schuh</td>
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<td></td>
<td>Emil Jones</td>
<td>Mike Claffey</td>
<td>Rahm Emanuel</td>
<td>Tom Cross</td>
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<td>Steve Brown</td>
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<td></td>
<td>Frank Watson</td>
</tr>
<tr>
<td></td>
<td>IL GOP</td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>IL Democrats</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Rebecca Rausch</td>
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<table>
<thead>
<tr>
<th><strong>Belief</strong></th>
<th>Responsibility</th>
<th>N/A</th>
<th>Heexpansion (healthcare expansion) Welfare</th>
<th>N/A</th>
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<table>
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<tr>
<th><strong>Summary</strong></th>
<th>No-Growth Budget Act</th>
<th>KidCare Rebate / FamilyCare Expansion</th>
</tr>
</thead>
</table>
Figure 6.16. Clusters of Actors and Beliefs in 2004

Figure 6.17. Hierarchical Clustering Diagram in 2004
As shown in Table 6.10 and Figure 6.16, the competing Pro-SCHIP Coalition and Against-SCHIP Coalition were observed in 2004. Pro-SCHIP Coalition split to three sub-coalitions: Pro-Issue Coalition 1, Pro-Issue Coalition 2, and Pro-Issue Coalition 3. Pro-Issue Coalition 1 is a coalition of governor and Illinois legislative members stressing on the “responsibility” of the state government. Facing fiscal crisis in Illinois, Governor Blagojevich did veto No-Growth Budget proposal. Governor Blagojevich (and Rebecca Rausch, Spokeswoman for the governor) wanted to increase spending including the coverage of KidCare increase and worried that No-Growth Budget would restrict the size of the proposed state budget, and further prevented new KidCare program. For this reason, the governor and Illinois Senate President Emil Jones, who was in cooperation with the governor, would veto the No-Growth Budget. Though House Speaker Michael Madigan was open to a no-growth budget, he seemed more realistic in approaching the budget issue. Madigan in principle supported Blagojevich’s proposed revenue increases, but he proposed a compromise for the budget proposal.

The Family Care expansion also was the top priority of Governor Blagojevich's plan to eventually offer health insurance to parents making 185 percent of the federal poverty level. In 2003, Illinois enrolled more working parents in a federally subsidized health-insurance program than any other states. Illinois’ annual increases in coverage were below the national average from 1999 to 2002. Pro-Issue Coalition 2 is a clustering of state agency including Barry Maram, director of Department of Public Aid, and Mike Claffey, spokesman for Public Aid. The cluster analyses did not find any beliefs attached to this coalition. In my reading of the texts, I observed that these state agency actors
frequently discussed KidCare expansion and further supported the Blagojevich administration’s effort to expand the state’s FamilyCare health insurance program.

Pro-Issue Coalition 3 is composed of actors who took health expansion approach in general, Senators Barack Obama and Dick Durbin, and Representative Rahm Emanuel. They shared beliefs such as “healthcare expansion” and “welfare.”

Against-SCHIP Coalition consists of legislative members, House Minority Leader Tom Cross (R), Senate Republican Leader Frank Watson, and Patty Schuh, spokeswoman for Watson. No beliefs in this coalition were observed, but the texts uncovered that they made a close relationship to pass a no-growth budget act.
### 3.i: Year 2005

Table 6.11. *Clusters of Actors and Beliefs in 2005*

<table>
<thead>
<tr>
<th>2005</th>
<th>Pro-Issue Coalition 1</th>
<th>Pro-Issue Coalition 2</th>
<th>Pro-Issue Coalition 3</th>
<th>Pro-Issue Coalition 4</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>[Governor / State Agency / IL Senate Coalition]</td>
<td>[IL Democrats / GOP Coalition]</td>
<td>[Pro-Agency / Nonprofit Org Coalition]</td>
<td>[Against-Treasurer / Governor Candidate / Legislature Coalition]</td>
</tr>
<tr>
<td></td>
<td>Rod Blagojevich Bill Brady Steve Raushenberger Bradley Tusk Abby Ottenhoff IL DHFS</td>
<td>Emil Jones IL Democrats Michael Madigan Cindy Davidsmeyer Steve Brown Gary Hannig IL Senate GOP IL House GOP</td>
<td>IL DPA Barry Maram Barnaby Dinges Genesis Center Teresa Bernuy John Frana ILCC Todd Maisch Chicago OCC IL SMS</td>
<td>Judy Topinka Jim Edgar IL GOP Cheryle Jackson Ron Gidwitz Becky Carroll Jim Oberweis</td>
</tr>
<tr>
<td>Actors</td>
<td>Welfare Cost effectiveness Hcexpansion (healthcare expansion) Bureaucracy Cooperation Universalhc (universal healthcare) Privathec (private healthcare) Responsibility</td>
<td>N/A</td>
<td>Privathec (private healthcare)</td>
<td>Govths (government healthcare system) Fiscal responsibility</td>
</tr>
<tr>
<td>Beliefs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Summary</td>
<td></td>
<td></td>
<td>All Kids Enactment</td>
<td></td>
</tr>
</tbody>
</table>
Figure 6.18. Clusters of Actors and Beliefs in 2005
Table 6.11 and Figure 6.18 show the complexity of the Illinois SCHIP clusters in 2005 with the existence of four pro- and against-coalitions as the coalition actors faced a controversial issue, All Kids enactment. All Kids, comprehensive health coverage for all children in Illinois, aimed at providing affordable children's health insurance for parents who cannot afford it. The program estimated $45 million as its start-up costs which would be subsidized by savings gained in shifting current Medicaid participants into a form of managed health care.
In Pro-Issue Coalition 1, Gov. Blagojevich was a key initiator of All Kids plan. Bradley Tusk (Deputy Governor), Abby Ottenhoff (spokeswoman for Governor), and Illinois Department of HealthCare and Family Services were supportive for Governor’s plan. However, Senators Bill Brady and Steve Rauschenberger were strong opponents to the governor’s plan. They criticized that Governor increased the state’ debt and political reasons exist behind All Kids enactment as the governor faces his re-election. The coalition members shared various beliefs bolstering All Kids plan (“universal healthcare,” “healthcare expansion,” “welfare,”” and “cooperation”) as well as challenging the plan (“bureaucracy,” “private healthcare,”” and “cost-effectiveness”).

Despite severe critics from state Republicans, Governor Blagojevich’s All Kids plan passed, given the support of Democratic Senate President Emil Jones and Democratic House Speaker Michael Madigan, and Democrat’s control of both the House and the Senate. Therefore, Illinois became the first state in the nation to offer health insurance for every child 18 and under. However, many Illinois Republicans found themselves in the uncomfortable positions of criticizing the program and concerning financial backdrop. Republicans questioned whether the state could afford All Kids and called the program as Governor’s campaign speech. Like Pro-Issue Coalition 1, Pro-Issue Coalition 2 also showed a mixture of a wide range of actors from Illinois Democrats and Illinois GOP concerning the All Kids enactment issue. There was no belief attached to this cluster, but the issue of All Kids bound the central actors together into the coalition.

Pro-Issue Coalition 3 includes state agency actors such as Barry Maram (director of Department of Public Aids) and John Filan (budget director). While Maram believed that KidCare is fiscally sound policy, Filan was slightly critical to governor’s budget
regarding All Kids. Other actors from non-government organizations, such as Teresa Bernuy (manager at Genesis Center) and John Frana (president of The Frana Group, one of the for-profit health organizations) supported All Kids program. This mixture group of both state agency and nongovernmental organization was for All Kids enactment in general with their shared belief, “private healthcare,” which the actors were against.

Some for-profit organizations, such as Illinois State Medical Society (IL SMS), Illinois Commerce Commission (IL CC), and Chicago CC (Chicago Chamber of Commerce), were generally in favor of All Kids, but wanted more details about the program. They seemed not to play a big role in the All Kids enactment process since they emerged later after All Kids passage from my reading of articles.

Against Coalition consists of diverse actors of Treasurer Judy Topinka, Republican Governor Candidate Ron Gidwitz, and Senator Jim Oberweis who were critical to Governor’s All Kids plan considering the expenditure for the plan. Cheryle Jackson, a Blagojevich spokeswoman, joined this coalition by commenting state’s fiscal issue. These actors were grouped with the beliefs, “government healthcare system” and “fiscal responsibility.”
### Table 6.12. Clusters of Actors and Beliefs in 2006

<table>
<thead>
<tr>
<th>2006</th>
<th>Pro-Issue Coalition 1</th>
<th>Pro-Issue Coalition 2</th>
<th>Pro-Issue Coalition 3</th>
<th>Against Coalition</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Beliefs</strong></td>
<td>Hcexpansion (healthcare expansion) Singlepayer (single-payer system) Universalhc (universal healthcare) Privatehc (private healthcare)</td>
<td>N/A</td>
<td>N/A</td>
<td>Welfare</td>
</tr>
<tr>
<td><strong>Summary</strong></td>
<td></td>
<td></td>
<td></td>
<td>All Kids Implementation FamilyCare Share, Premium, Rebate</td>
</tr>
</tbody>
</table>
Figure 6.20. Clusters of Actors and Beliefs in 2006
The cluster analysis in ORA found the four meaningful clusters including Pro-SCHIP Coalitions and Against-SCHIP Coalition. Based on their beliefs attached to the clusters and specific issue the actors faced, Pro-SCHIP Coalition was divided to three sub-coalitions. Pro-Issue Coalition 1 consists of actors who are grouped to deal with the issue, All Kids. All Kids was originally Gov. Blagojevich’s idea, and the governor was in cooperation with his administration actors including Deputy Governor Bradley Tusk, spokeswoman Abby Ottenhoff, and campaign spokesman for Governor Doug Scofield (see Table 6.12 and Figure 6.20). However, Green Party candidate Richard Whitney in this cluster criticized All Kids as political campaign. Rather, he pushed for single-payer
healthcare coverage in Illinois and fund it by raising state income taxes on the top 40 percent of earners. Ken Robbins, President of the IL Hospital Association was in line with Blagojevich’s idea. Treasurer Judy Topinka, one of the major Republican candidates for governor also questioned the Governor’s spending for All Kids. The key beliefs of these actors were “universal healthcare,” “healthcare expansion,” “single-payer system,” and “private healthcare” as they discussed a wide range of healthcare system for the state children.

Pro-Issue Coalition 2 is a coalition of Illinois legislative members who were in charge of new state budget. For the Governor’s budget including the increase of All Kids funding, Illinois Democrats (e.g., Senate President Emil Jones and House Speaker Michael Madigan) were strong supporters as their political positions were closely tied to Governor. Democrats aggressively defended Governor from the critics of a fiscal crisis while Illinois GOP (e.g., Tom Cross and Frank Watson) was against All Kids and any state budget increase.

Pro-Issue Coalition 3 includes the actors working for re-election campaign of Governor Blagojevich (Sheila Nix, senior adviser to Governor and spokeswoman for his campaign, and Louanner Peters, policy adviser for social services). As supporting the state-subsidized health insurance plan for children was the centerpiece of Governor Rod Blagojevich’s campaign, the actors were in line with Governor’s All Kids plan. No beliefs were observed in both Pro-Issue Coalition 2 and 3. My text interpretation provides the details of how they were interacted and grouped based on the critical issues they face in this year.
Against-SCHIP Coalition is composed of the GOP governor candidates such as Senator Bill Brady, GOP Candidate Ron Gidwitz, and businessman Jim Oberweis. Their policy position was against All Kids with their opposition to the belief, “welfare.” The main reason of criticizing All Kids was from a fiscal problem. They argued that All Kids would not be affordable when the state faces financial pressures.

3.k: Year 2007

<table>
<thead>
<tr>
<th>2007</th>
<th>Pro-Issue Coalition 1</th>
<th>Pro-Issue Coalition 2</th>
<th>Pro-Issue Coalition 3</th>
<th>Pro-Issue Coalition 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Actors</td>
<td>[Governor/IL House Coalition]</td>
<td>[President / IL Legislature Coalition]</td>
<td>[Nongov’n Organizations / Legislature / Local Department Coalition]</td>
<td>[Pro-IL Legislature Coalition]</td>
</tr>
<tr>
<td></td>
<td>Rod Blagojevich</td>
<td>IL Democrats</td>
<td>AARP</td>
<td>Bobby Rush Danny Davis Janice Schakowsky Jesse Jackson Luis Gutierrez Phil Hare</td>
</tr>
<tr>
<td></td>
<td>Abby Ottenhoff</td>
<td>ILGOP</td>
<td>AMA</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Anne Murphy</td>
<td>George Bush</td>
<td>Judy Biggert CBHC</td>
<td></td>
</tr>
<tr>
<td></td>
<td>JCAR</td>
<td>Dick Durbin</td>
<td>Charles Grassley</td>
<td></td>
</tr>
<tr>
<td></td>
<td>David Miller</td>
<td>Rahm Emanuel</td>
<td>Orrin Hatch</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Rosemary Mulligan</td>
<td>Ray Lahood Dennis Hastert Mark Kirk</td>
<td>Jim Duffett</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mike Stokke</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Jim Edgar</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>George Ryan</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Beliefs</td>
<td>Hcexpansion (healthcare expansion)</td>
<td>Privatehc (private healthcare)</td>
<td>Socialized medicine</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Universalhc (universal healthcare)</td>
<td>Govths (government healthcare system)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Welfare</td>
<td>Cooperation</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Health reform (healthcare reform)</td>
<td>Govtintervention (government intervention)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Nationalizedhc (nationalized healthcare)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Summary</td>
<td></td>
<td></td>
<td></td>
<td>SCHIP Reauthorization</td>
</tr>
</tbody>
</table>
Figure 6.22. Clusters of Actors and Beliefs in 2007
The year of 2007 shows the complex policy process including a variety of state and federal government actors within the context of the reauthorization of SCHIP at the federal level. Since his re-election, Governor Blagojevich worked to expand Medicaid and related programs, providing medical coverage to more than 530,000 state residents. His All Kids program was the first in the nation to offer health insurance to all children in the state. Concerning the key issue of the SCHIP reauthorization, the result of my cluster
analysis showed four pro-coalitions. In Pro-Issue Coalition 1 (see Table 6.13 and Figure 6.22), Governor Blagojevich worked with Abby Ottenhoff (governor spokeswoman), Anne Murphy (senior policy adviser) to propose a universal plan (“Illinois Covered”) in his term. Representative David Miller (D, member of Joint Committee on Administrative Rules [JCAR]), Representative Rosemanry Mulligan (R), and Mike Stokke (aide to Former House Speaker) were critical to the governor’s plan because they saw it an increase of government intervention. This coalition were networked on the basis of beliefs, “healthcare reform,” “healthcare expansion,” “universal healthcare,” welfare,” and “nationalized healthcare system.”

Pro-Issue Coalition 2 consists of the actors from both the federal and the state governments. In 2007, one of the key actors was President Bush since he announced to veto a bill that would expand government-sponsored health insurance for lower-income kids, SCHIP. President Bush was concerned that the SCHIP reauthorization is too costly and the government would not afford the universal, government-sponsored health coverage. Representative Rahm Emanuel (D) was in cooperation with Representative Ray Lahood (R) to push for the SCHIP reauthorization of the Bush Administration, and Senator Dick Durbin (D) joined them. On the contrary, Dennis Hastert (Former House Speaker, R) and Representative Mark Kirk (R) supported the Bush administration’s budget proposal that cuts funds for the children’s health insurance expansion. These federal and state actors were clustered based on the beliefs, “universal healthcare,” “governmental healthcare system,” “government intervention,” and “cooperation.”

In Pro-Issue Coalition 3, Representative Judy Biggert (R) was strongly against the reauthorization bill because he believed it means socialized medicine. Senators Charles
Grassley and Orrin Hatch were for the reauthorization bill. The SCHIP reauthorization bill had the backing of a wide range of health advocates, such as AARP (American Association of Retired Persons), AMA (American Medical Association), CBHC (Cook County Bureau of Health Services), and Jim Duffett (Executive Director of the IL Campaign for Better Health Care). This group provides a state-level discussion about SCHIP reauthorization.

In Pro-Issue Coalition 4, all IL Representatives (D), Bobby Rush, Jesse Jackson, Phil Hare Luis Gutierrez, and Janice Schakowsky agreed on the Blagojevich’s universal health plan “Illinois Covered.” The Illinois Covered plan, a universal health insurance program, aimed to offer affordable state-sponsored health insurance to all. The text interpretation clearly showed that the actors in this coalition were closely interrelated to support the Governor’s Illinois Covered plan and further, SCHIP Reauthorization, but there was no belief in this coalition.

In Chapter 7, I reflect on the findings presented in this chapter. I also provide an in-depth discussion of the SCHIP policy network structure and their impact on policy change based upon the findings from this investigation.
CHAPTER 7. CONCLUSIONS

In this chapter, I provide a summary of a series of my cluster analyses on the SCHIP policy process and an in-depth discussion of a linkage between the cluster maps and the theoretical frameworks of this study, the PNT and the ACF. My observation and interpretation will answer the rest of research questions. Some of the broader theoretical and empirical implications of the research findings are also presented. The chapter concludes with the limitations of this study and the recommendations for directions for future research.

1. Summary and Discussion

In this study I aimed to test the basic predictions of the ACF. Specifically, I performed cluster analyses in ORA to find combinations of the actors and beliefs attached to each cluster. The results of my cluster analyses provide answers to the first specific research question (1-a): Were there two policy coalitions (networks), one pro-policy and one against-policy, in the SCHIP policy processes in Illinois, as predicted by the ACF, or were there different configurations of networks, during the period studied: 1997-2007?

The cluster analyses identified at least three types of advocacy coalitions in the Illinois SCHIP policy subsystem based on shared policy beliefs during the 11 years I analyzed, 1997-2007: pro-SCHIP advocacy coalition, against-SCHIP coalition, and neutral coalition. I also found that the pro-SCHIP coalitions can be split into two to four sub-coalitions. The results of my cluster analyses partly confirmed the ACF prediction
that there are competing pro- and against-coalitions in the SCHIP policy process for some of the years, particularly from 2002 through 2006.

Then, what are the key rationales for the coalition formation? If the cluster analyses partly support the ACF’s predictions, how can we explain the different configurations of the other networks? An in-depth interpretation of the clustering maps is needed to answer to the following second specific research question 2-b: What were the beliefs (“knowledge” as they are measured in ORA) in each of these coalitions (networks)?

The key rationale for forming the SCHIP coalitions can be understood within the ACF. The ACF posits that policy actors’ beliefs and behaviors are embedded within informal networks. A policymaking process is structured by the network interactions among these policy actors. The cluster analyses in ORA identified key actors’ groupings in the SCHIP processes and beliefs that those actors hold. The clusters were placed into pro- and/or against-SCHIP coalitions, based upon their beliefs that bind coalition members together during the time period of 11 years. For the first years (1997-2001) and the last year (2007), I observed a group of pro-SCHIP coalitions. My interpretation of the news articles presented that policy actors in the IL SCHIP policy processes reached on a broad consensus on SCHIP authorization and KidCare enrollment during those years, and therefore no explicit conflicts among policy actors were found. However, as controversial issues (e.g., SCHIP expansion) appeared in the period between 2002 and 2006, the polarized compositions of two competing pro- and against-SCHIP coalitions occurred over the issues.
The SCHIP policy subsystem includes a large number of governmental and non-governmental actors, such as state and federal agencies, local executive agencies, legislative committees, elected officials, interest groups, and nonprofit organizations. Specifically, the key membership of the pro-SCHIP coalition during the 11 years includes governors, IL Democrats, state agencies and nonprofit organizations. From a series of tabular information for each year, I found that they shared common policy beliefs such as “healthcare reform,” “welfare,” and “universal healthcare system.” The against-SCHIP coalition throughout the all years was mainly dominated by IL GOP who held beliefs like “big government,” “private healthcare system,” “socialized medicine,” or “fiscal responsibility.” The against-SCHIP coalition showed a certain level of coherence in their beliefs in the policy processes over the years. However, they were less likely to stick to specific policy beliefs. For example, while IL GOP was more likely to show substantial consensus on their fundamental policy value (e.g., against-healthcare expansion) throughout the 11 years, in 1998 they switched their policy position to pro-healthcare expansion by approving IL KidCare. Because ORA is not capable of identifying the hierarchical belief systems addressed in the ACF, I focused on the text interpretation to understand the changes in actors’ beliefs.

It is interesting that neutral coalitions were observed in the years 2001 and 2002. These neutral coalitions could be interpreted in two ways. First, they may be methodological artifacts, residual groups that cluster analyses could not group otherwise. The clustering algorithm I used in ORA, Newman, generates clusters by combining two most similar actors into a new cluster and repeats this process (This process is similar to other hierarchical clustering algorithms). Then Newman connects each belief to each
cluster, based on its calculation of a similarity measure (proximity in the text). These proximities may be coincidental. For example, the first neutral coalition appeared in the year 2001 and the coalition consisted of actors who were involved in the Rainbow PUSH scandal of no-bid contract from then-governor Ryan to promote KidCare. The cluster analysis identified two beliefs, “welfare” and “responsibility,” and attached them to the cluster of this Rainbow PUSH Scandal Coalition. In my reading of the original texts, I found that these actors and beliefs did not signify any competing pro- and against-coalitions.

Second, neutral coalitions may represent the actors who are mostly in the bureaucracy and therefore they are not associated with particular beliefs. In that sense, they are neutral on the policy debates of their time. For example, the Pro-Coalition consisting of State Agency-Auditor General coalition in 2002 was solely concerned about the implementation and audit of KidCare program. This group is neutral in a sense that the coalition members have no policy preferences regarding the SCHIP.

It is noteworthy that the number of the SCHIP coalitions was clustered along policy issues, such as legislation (e.g., SCHIP authorization and reauthorization) and variable program implementation (e.g., KidCare Expansion) in this time period, 1997-2007. The set of policy beliefs played an important role in determining coalitions in the SCHIP policy process. However, the findings of my cluster analyses showed that some groupings of policy actors were clustered around policy issues, not beliefs. If the observation of these coalitions does not confirm the ACF’s prediction of the competing pro- and against-coalitions, then how can I conceptualize them? The relevant discussion
can be an answer to my first general research question: What are the characteristics of the policy networks in the SCHIP policy processes in Illinois?

In the results of a series of cluster analyses, I found that the pro-SCHIP coalition was split into two to four sub-issue coalitions. It is notable to find that there were some sub-coalitions with no beliefs attached through the 11 years. Additionally, some among these sub-coalitions had heterogeneous configuration in terms of their membership; these sub-coalitions include diverse policy actors regardless of their different beliefs and policy positions. These mixed advocacy coalitions (e.g., President/IL GOP/IL Democrats coalition, governor/IL legislature coalition, governor/state agency/IL senate coalition, and so on) are observed in the years 1997, 2001, and 2003 through 2007. The existence of these mixed sub-coalitions does not provide strong conceptual support for the ACF’s basic assumption. Otherwise, these coalitions in the Illinois SCHIP can be better conceptualized as “policy issue coalition.” The term policy issue coalition is not a mutually exclusive concept, but a complementary one to better understand the SCHIP policy coalitions. The findings of my sub-group analyses presented that the set of beliefs of the ACF did not solely explain the rationale of coalition formations. In order to provide an in-depth understanding, I interpreted the texts and found that policy actors sometimes are grouped in line with specific policy issues prominent in the years. These issue-oriented networks can be understood as policy issue coalition following Heclo’s discussion of issue networks.

The ACF also helps explain policy changes over periods of a decade or more in relatively complex policy situations. As I discussed in the previous section, the SCHIP policy coalition structures were not stable over the years. The policy actors in the
advocacy coalitions frequently switched their allies through the years. The discussion of the impact of the policy network structure on the policy change is related to my third general research questions: How did the policy network characteristics and their evolutions affect the policy changes in the SCHIP policy processes in Illinois?

The ACF regards a policy process as a broad structure in which policy subsystems are constrained and influenced by the stable and dynamic nature of external factors. Policy change stems from systemic change external to the subsystem, such as the changes in socio-economic conditions or the rise of a new governing coalition. The external events cause policy change by creating the conditions necessary to produce new governing coalitions or new policy approaches. Alternatively, advocacy coalitions bring about policy change by modifying their beliefs and behaviors in response to activity within the subsystem. Also, Sabatier and Jenkins-Smith (1993) identified policy-oriented learning, which is “relatively enduring alternations of thought or behavioral intentions that result from experience and which are concerned with the attainment or revision of the percepts of the belief system of individuals or of collectivities (such as advocacy coalition)” (p. 42).

The results of my analyses provide support for the ACF’s assumption that exogenous events present subsystem actors with opportunities or obstacles for changes of their policy beliefs and preferences into public policy. In some of the years changes can be observed in policy actors’ beliefs. In particular, election years signified important changes in subsystem policies and in the beliefs of policy actors. Illinois gubernatorial elections were held in 1998, 2002, and 2006. The candidates from both Democratic and Republican Parties agreed on the expansions of Illinois SCHIP, but they did not reach an
agreement on other issues, such as state budget or environment. The gubernatorial elections, combined with other factors (e.g., pressure from interest groups or voters), influenced the beliefs of critical candidates and may have caused them to switch their policy position. In addition, an external system, the federal government, dramatically affected the SCHIP policymaking process in Illinois. For instance, president Bush’s veto on reauthorization in 2007 had influence on the Illinois Republicans’ behavior. Though their policy position was consistent with the against-SCHIP coalition, the Republicans switched their stance to the support for SCHIP authorization and healthcare expansion. Republicans were encouraged to form a broad pro-SCHIP authorization coalition with Governor Blagojevich, Illinois Democrats, and a wide array of nongovernmental organizations. The change of Illinois Republicans’ belief can be explained within the context that Republicans were concerned about the SCHIP funding shortfalls and inadequate coverage to needy families in the state that might be caused by President Bush’s veto.

2. Implications

The findings of this study have important implications not only for scholars but also for researchers and practitioners. In this section, I discuss both theoretical, methodological, and policy implications of this study.

A. Theoretical Implications

In this study I used a conceptual framework to explain the characteristics of policy networks and their impacts on the policy changes in the SCHIP policy processes in
Illinois between 1997 and 2007: a synthesis of policy frameworks, the PNT and the ACF, portrays coalition formation as a dynamic and complex process in a state health policy domain. In this study I addressed several questions concerning the nature of complex network relationships to identify the coalition configurations within a subsystem of SCHIP policy process.

The findings of this study contribute to the ACF literature by empirically identifying the key rationales of network coalitions in a policy subsystem of the Illinois SCHIP policy process. The results of my network text analyses and dynamic network analyses overall support the ACF’s prediction: Policy actors in the SCHIP policy process formed advocacy coalitions based on their similar beliefs about the SCHIP policy. For some years (2002-2006), I observed that there were competing advocacy coalitions, pro- and against-SCHIP coalitions, based on the shared policy beliefs. The findings indicate that the actors of pro-SCHIP coalitions shared policy beliefs concerning the expansion of healthcare, welfare, healthcare reform, equity, and safety net. Against-SCHIP coalitions were driven by the beliefs such as big government and fiscal responsibility, as they opposed to the expansion of the healthcare system, including SCHIP. This is consistent with other ACF studies that show advocacy coalitions are defined by shared beliefs and some level of coordinated behavior (Sabatier & Jenkins-Smith, 1993).

The policy subsystem of the SCHIP policy process involves the policy actors from all levels of governments as well as nongovernmental actors. The results of the ORA analyses show that the central actors in the IL SCHIP policy processes are governors, state agencies, the groups of the members of IL legislature (e.g., IL GOP and IL Democrats) and nonprofit organizations. The federal government was often involved
as an actor (either as a supporter or a challenger) in the SCHIP authorization and reauthorization processes. My finding support similar ACF studies conducted by Sabatier, Hunter, & McLaughlin (1987) and Sabatier & Zafonte (1998), indicating that state and federal government officials are often active members of advocacy coalition. The ACF that I used in this study parallels a growing policy network literature since it particularly has an emphasis on the configuration and interaction of coalitions of actors within a particular policy network or policy subsystem.

The configuration of the SCHIP coalitions seemed more complex as a series of controversial policy issues (i.e., SCHIP authorization and reauthorization) arose during these years. The pro- and against-SCHIP coalitions did not seem to be identical in terms of their composition throughout the years. Each coalition consists of diverse policy actors and these actors frequently switch their allies or memberships throughout the years. Accordingly, in the case of Illinois, there were no consistent pro- and against- policy coalitions during the 11-year period studied, which does not confirm the prediction of the ACF. Instead, specific policy issues occasionally affected the coalition formation among various groups who are composed of governmental and nongovernmental actors. In this sense, these coalitions in the Illinois SCHIP can be better conceptualized as “policy issue coalition.”

Heclo characterized issue networks as a type of policy network with a large number of participants with mutual commitment in their sense of issues. Participants in the networks move in and out of the networks constantly. The findings of policy issue networks confirm Heclo’s argument that policy actors in the coalitions have interdependent relationships each other to promote and achieve their policy goals. For
instance, governors and the legislature were top policy actors during the all years. Governors are more likely to be grouped with state agency actors and IL legislature members. Specifically, governors needed aid from state agencies (e.g., Department of Public Aid) to facilitate children’s health programs in Illinois. Concerning a series of legislative activities, governors actively made allies with congressional members to successfully pass the SCHIP bills. State agencies were also one of the active policy actors during the period of 11 years, except the years 2001 and 2007. It is assumed that state agencies, key SCHIP implementation entities, might play a minor role when the enactment of the SCHIP expansion was a top issue among policy actors in those years. State agencies are expected to perform as aids or cooperators to governors or other actors.

Given the complexity of the SCHIP policy process, I needed to find a way of simplifying the context in order to have an in-depth understanding of the SCHIP policy network and their impact on policy change. The PNT, specifically, issue network approach, parallels the ACF’s prediction that subsystem policy actors form pro- and/or against- SCHIP coalitions based on their beliefs or issues they face. The term issue network is a complementary term, not contradictory one for the ACF’s advocacy coalition. According to Heclo (1982), issue networks include a large number of participants with mutual intellectual or emotional commitment. Issue networks may, or may not, be transformed into shared-action groups or shared-belief groups.

The ACF follows Heclo’s discussion that policy change is a product of the interaction of policy actors within the context of both a subsystem and a broader political and socioeconomic environment (Sabatier, Jenkins-Smith, 1993). In this sense, Heclo’s (1982) conceptualization of issue network is in line with advocacy coalition defined in
the ACF. Jenkins-Smith, Nohrstedt, Weible, and Sabatier (2014) point out that the theoretical logic of the ACF can be revised by adding new substantive theoretical contents to the ACF’s key hypotheses. They argue theoretical adjustments and adding new contents to a theory can help strengthen it. My finding that there were neutral coalitions, in addition to the pro- and against-coalitions in the Illinois SCHIP process, could contribute the ACF.

**B. Methodological Implications**

The social network perspective not only helps us to understand the complex policy process conceptually, but also provides us with a set of finely designed methodological tools for exploring the empirical world. My investigation of the SCHIP policy processes serves as an illustration for how network analytic methods can be effectively used for public policy studies, specifically studies on policy networks and policy change.

A growing number of studies have been conducted on the structural characteristics of policy networks in the last decade. This literature suggests that network size, network density, structure of cliques in the network, and network centralization in the network are among such characteristics. These features relate to the group, or “whole network” level, with the exception of the cliques, which are found at the sub-group level.

Specifically, in the social network analysis (SNA) methodology, the measures of network size, network density and network centralization have been commonly used to determine the structural characteristics of networks. Sandström and Carlsson (2008) focus on network size, network density, and network centralization as the basic structural
elements of policy networks and take their measures accordingly. According to them, networks with higher degrees of density and centralization are relatively more effective in achieving network goals.

This study is the first application of social network analysis tools to investigate the networked relationships in SCHIP policy processes in states. In this study, I utilized AutoMap (network text analysis tool) and ORA (dynamic network analysis tool) to determine the network measures and its structural characteristics. The group-level measures produced in ORA provided useful information about the SCHIP policy coalitions and their interaction patterns. The density measure proved to be a good estimator of the size of the SCHIP policy network. The value implies that the low density rate in my results was associated with a respectively big group size of the SCHIP policy network. The degree centralization measure was also meaningful in this study. As addressed in the previous chapter, with a lower score of degree centralization, there is no central actor in the SCHIP coalition. Rather, the network structure is not stable as a wide array of policy actors from different fields and different levels are involved in the policy processes. In essence, the SCHIP policy network can be characterized as having the fragmented compositions of networks.

The ORA and AutoMap analysis tools also have strengths when they come to conducting the empirical study of network formation and policy change in the policy process. With a sophisticated mathematical algorithm, ORA is a powerful tool which is capable of meta-network analyses extracting relationships not only among actors but also their knowledge (belief). The cluster analyses conducted by ORA identified subgroups in the network and extracted actor and belief relationships. Unlike the UCINET, which
conduct the one-mode matrices analyses to analyze the actors’ relations, ORA has more capabilities by analyzing multiple sets of network relations (Diesner & Carley, 2004). I attempted to analyze a set of network relations, including actors, beliefs (coded as “knowledge” in ORA), and resources to map not only the networks among actors but also the links between actors and their beliefs or resources.

The methodology of data collection used in this study employs content analysis of archival data, news articles. News articles in which policy elites express policy positions, values, and beliefs can provide an alternative to surveys and scorecards as a source of data (Holsti, 1969; Krippendorff, 1980). Using news articles has some strengths for his SCHIP policy networks study. First, more readily than surveys, news articles allow retrospective analysis and analysis of changes in expressed beliefs, specifically when the same individual actors repeat expression of policy beliefs over time. Second, AutoMap is a useful tool by easily extracting and analyzing not only the relations among network actors but also knowledge they have by uncovering patterns of key actors, their quotes, and paraphrases in texts. As a consequence, it is feasible to detect these patterns from the text and extract a model of links and relations between concepts and ideas (Carley, et al., 2013). The specific SNA methodology I used in this study contributes to the policy literature by introducing the innovative methods of network text analysis (AutoMap) and dynamic network analysis (ORA).
C. Policy Implications

The findings of this study have important implications not only for scholars and researchers, but also for policy actors. As the policy environment becomes more complex and intricate, policy actors face a number of intergovernmental and interagency issues. A policy network perspective is increasingly necessary to understand the complex problems policy actors face.

The ACF contributes to our understanding of policy processes by highlighting roles the shared beliefs of policy actors play in them. The methods I used, Automap and ORA, can help identify the actor coalitions and the beliefs attached to them. The ACF’s insight and the findings of Automap and ORA can provide practical guidance for relevant policy actors and practitioners to identify not only the coalitions, but also their beliefs. This kind of information can help policy actors navigate increasingly complex policy environments and achieve their policy goals.

3. Limitations and Suggestions for Future Research

Despite its significance and the many insights that it generated about the state health policy domain, this study has a number of limitations that need to be acknowledged. First, this study mainly relied on newspaper articles. One potential problem with the newspapers is that this may create some bias issues. It is because topic selections are made by newspaper reporters or editors based on their own discretion. However, the alternative data sources, such as surveys and interviews, have their bias problems as well. Conducting surveys in a longitudinal study would be even more problematic because interviewees are not likely to answer the questions about the events
occurred many years ago accurately (Knoke & Yang, 2008; Morçöl, Vasavada, & Kim, 2013). Survey research studies rely on self-reports and respondents may not remember past events in accurately, particularly in situations where the issue of interest is relatively nonsalient to the respondent. Given the longitudinal nature of my study, the archival data from established newspapers should be still the best option available.

Second, although the techniques of both AutoMap and ORA are promising in social network analyses, these network analysis tools have some limitations in their applications. An important issue is the validity of the identifications of the actors and their ontological categories in network text analyses. The use of available data is a flexible and powerful approach to social research. However, a major problem is that some words in texts may not be directly relevant or may mean different things in other different contexts. In particular, in using archival data, there may be a chance of overlaps among these actors or categories when the name of an actor who represents an organization and the organization are cited in the same text. This may cause overlaps or confusions in interpreting the results of analyses. Identifying individual and organizational actors is a key validity issue in the network text analyses.

In order to ensure the validity in identifying and defining actors, the results of the network analyses needs to be supplemented by a direct interpretation of texts. After a series of these structural analyses with AutoMap and ORA have been completed, a researcher needs to go back to the text and re-read the relevant articles to eliminate the possibilities of overlaps or ambiguities in understanding the results. Another reason of text interpretation is to make inferences by objectively and systematically identifying contents. The quantitative network analysis approach is descriptive in nature and
sometimes has a limitation to explain the causal relationships observed in the findings. A review and interpretation of the texts helps gather specific information about texts and better understand the context of the policy process with greater details. Future research, therefore, may consider using in-depth qualitative research to supplement the quantitative methodology in order to gain further insights about the policy networking relationships. A research could conduct a series of interviews with key policy actors who are verified in the first phase of quantitative analysis. The interview data could present a detailed understanding of the SCHIP process while the quantitative analyses show a general understanding of the networks map (Creswell, 2009).

This dynamic network analysis has limitation in understanding the in-depth belief systems individual actors have. According to the ACF, it is important to assess the stability of coalitions across policy stage by comparing the content of policy outputs to the belief systems of subsystem actors. The formation of advocacy coalition is based on the shared views on the deep core beliefs and the policy core belief among policy actors. The cluster analyses in ORA find the combination of actors and beliefs in groups. ORA is not capable of identifying the hierarchical belief system (e.g., deep core, policy core, and secondary) addressed in the ACF. Conducting in-depth interviews or surveys could provide a good source to capture the three-tiered belief system expressed by individual actors.
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Appendix

Description of the protocol for AutoMap and ORA applications

AutoMap and ORA are useful tools for extracting relations and mapping the links and relations in the complex governance networks. In this section, I briefly describe the protocol for AutoMap and ORA applications. I present the protocol I used to identify (1) the structural characteristics of the whole networks (i.e., network size, density, and centrality), (2) the central actors in the network, and (3) the clusterings of actors and their beliefs throughout the years I studied.

I first read all the 261 newspaper articles to identify the individual and organizational actors in the SCHIP networks. I listed the names of these actors to develop two thesauri: (1) generalization thesaurus, and (2) meta-network thesaurus. Generalization thesaurus possibly matches words and word groups with their synonyms (Morçöl, Vasavada, Kim, 2013). AutoMap detects the words and word groups in the texts and replaces them with a more standard form. In this study, the words “state children’s health insurance program,” and “Illinois children’s health insurance” were converted to “SCHIP”. Then, I created a meta-network thesaurus including actors, knowledge, resource, and task, organization. I analyzed only the actor-actor and the actor-knowledge matrices in the analyses. It is important to note that there is an issue of the identification of actors or other available categories in meta-networks. Since I know the names of the relevant policy actors in the SCHIP process, thus, these actors are generally referred to by their names. I attempted to identify a policy actor if either his last name is mentioned or his first name is mentioned and his last name was mentioned
earlier in the same text. Also, policy actors are recognized by references to the office held by them. For instance, Illinois public schools as a joined organization is referred to its director Paul Vallas.

For the analyses, I grouped the newspaper articles by each year during the period, 1997-2007, and extracted one meta-network for each year. I applied the generalization thesaurus to the set of article texts in AutoMap and used the option “generalization thesaurus only” to delete the words, numbers, symbols in the texts that are not listed in the thesaurus. Then, I applied the meta-network thesaurus to a set of texts to generate a meta-network. In generating a meta-network, the option “using thesaurus content only” was selected in order to replace all concepts in the texts with key concepts that are listed in the thesaurus. The following summary protocol provides an analytical procedure for the data analyses (adapted from Morçöl, n.d.; Morçöl, Vasavada, & Kim, 2013).

**Summary Protocol for the Automap and ORA Analyses**

The following is a summary of the protocol that was developed by Morçöl (n.d.). It was used in Morçöl, Vasavada, and Kim (2011, 2014) and Kim and Morçöl (2015). More detailed information about the steps in this protocol is available from the authors of this paper upon request.

**Steps in AutoMap Analysis**

1. **Extracting Meta-Networks using Automap**

   1. **Develop/Revise/Update a Generalization Thesaurus and a Meta-Network Thesaurus**
Note: Generalization thesaurus matches words and word groups with their “synonyms.” Automap detects these words and word groups in the texts loaded into it and converts them to their synonyms, as instructed in the generalization thesaurus (e.g., in Morçöl, Vasavada, and Kim’s (2014) analyses, “Center City District” was converted to “CCD”). Using a meta-network thesaurus, Automap generates “meta-networks,” which include matrices of a variety of nodes: actors, resources they use, actions they take, their locations, etc.

The validity and reliability of the identifications of the nodes and their ontological categories are important in generalization and meta-network thesauri. A potential problem is that both the proper name of an actor who represents an organization and the organization may be cited back-to-back in the same text, which may cause double-counting. Morçöl, Vasavada, and Kim (2014) noticed, after their initial analyses, that the proper name of the executive director of the BID and the name of the BID were frequently cited in close proximity or back-to-back. To prevent double-counting, they included only the name of the director of the BID in their analyses and excluded the name of the BID.

2. Preparation of the generalization thesaurus file.

2-1. Read each news articles and add category lists.
   The categories will include individual agent, collective agent, organization, resource, knowledge, and action.

2-2. Convert this file into a CSV file (e.g., “SCHIP Generalization Thesaurus.csv”).

2-3. Edit the generalization thesaurus file in AutoMap:
   Tools
   Thesauri Editor
   Under “File”:
   • Open file.
• Check the file visually (Is there any item on the third column? If yes, make the correction or remove it.)

Under “Procedures”:
• Check thesaurus for missing entries.
• Check thesaurus for duplicate entries.
• You may want to use “Sort thesaurus file,” but this is tricky; it sorts some of the entries in a way that you may not want.
• Once these are done, save the file.

2-4. Open the generalization thesaurus (csv) file in Excel and double-check the corrections and revisions you made using the thesaurus editor in AutoMap.

2-5. Once the corrections are made in the generalization thesaurus, add the categories in the original Excel file (“SCHIP Generalization Thesaurus.xls”) and save it under the name of this Excel file.

3. Prepare the meta-network thesaurus file.

3-1. Remove the first column of entries in this Excel file. (The categories in the last column should remain.)

3-2. Remove the duplicate entries in this file. (This is labor intensive. This step may not be necessary. ORA seems to be tolerant of duplicate entries. If it is, then there is no need to do this.)

3-3. If you see errors in the generalization thesaurus and the Excel file, correct them.

3-4. Save this file as a meta-network thesaurus file.

3-5. If for some reason you need to develop your own thesaurus from scratch using AutoMap, here is how:
Generate

MetaNetwork

Suggested MetaNetwork Thesauri

3-6. Once AutoMap creates a “suggested thesaurus” for you, you will need to revise it.

4. Prepare the File(s) for AutoMap Analysis.

4-1. Make sure that each newspaper article is directly relevant to the key word you study (e.g., SCHIP).

4-2. Save each newspaper article separately as a text file (.txt, Windows Default). Name each article using the following coding scheme:

CT19970207.txt

(Abbreviation for the newspaper’s name (e.g., Chicago Tribune is named as “CT” and date of publication in the following format: year (four digits), month (two digits), day (two digits)

4-3. Load the text file(s) into AutoMap.

File

Import Text Files

• Load all the articles published in the same year together.
• Select all of them from the directory and load all at once.

4-4. Develop a meta-network:

a. Preprocess data to clean up:

Note that whether you remove symbols, punctuation, and numbers will have consequences. Also whether you choose the “replace with space” option in the following operations will have consequences. These choices should be coordinated with the wording used in the generalization thesaurus. The most straightforward method may be not to remove symbols, punctuation, or numbers and apply generalization thesaurus directly.
- Remove symbols
- Remove punctuation
- Remove numbers

b. Apply the generalization thesaurus (“SCHIP Generalization Thesaurus.csv” or the most recent version of the thesaurus file).

- Select “Use thesaurus content only: Yes.”
- [This is a potentially problematic issue. Carley (personal communication) states that his creates sparsely populated networks. That is a problem, but this method still yields the most valid results.]
- Select “type of delete processing: Rhetorical.”
- “Would you like to include an exception list: No.”

c. Generate a *meta-network*:

Generate MetaNetwork

MetaNetwork DyNetML (Per Text) or (Union Only)

- Select (or create) a directory for the meta network to be created.
- Then select the meta-network thesaurus to be used in the meta-network generation (i.e., select “SCHIP Meta Network Thesaurus.csv”).
- Select *directionality*: unidirectional
- Select *window size*: a number between 20 and 40
- Select *stop unit*: “All”
- Select *stop unit value*: none [This is not applicable when “all” is selected. If “sentence” is selected, this value represents the number of sentences to be included in each step of the analyses.]
II. Prepare meta-network files for ORA

- AutoMap saves meta-network files for each year.
- Rename the meta-network files by adding the year and window size to easily recognize them when you load the files to ORA

Steps in ORA Analyses

[Note the following does not include all the options in ORA. It is meant to provide a basic outline of some of the methods that can be used in ORA.]

1. Read the meta-network into ORA

   In ORA:
   
   File:
   
   Open meta-network

2. Analyze the meta-network in ORA

   a. Visualize the network first.
   This creates both the meta network map and the semantic network map.

   b. Generate reports:
   To generate reports:
   
   Analysis
   
   Generate Reports

   - Select “Standard Network Analysis.”
   - Select the number of ranked nodes to display [we choose the default value of 10 or insert a larger number here].
   - Select an attribute and value [We choose “frequency” and “1”].
• Select “agent*agent” network.

The Standard Network Analysis report generates group level measures (e.g., number of articles, number of agents, density, degree centralization, network levels, clustering coefficient, network fragmentation, Krackhardt connectedness, Krackhardt hierarchy) and individual level measures (e.g., top ranked agent charts, total degree centrality, eigenvalue centrality, betweenness centrality).

• Select “Locate Subgroups” report for cluster analysis.
• Select the input network: agent * agent, agent * knowledge [For the purpose of your study, you can modify the analytical options].
• Select a “Grouping Algorithm”: Newman.
• Select “Automatically Compute Number of Groups.”
Vita

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