

INTEREST GROUPS

According to our customary quantitative indicators, there can be little doubt that interest groups loom very large indeed.² They were discussed as being very important in fully one-third of the interviews, and somewhat important in an additional 51 percent. This total of 84 percent compares to 94 percent for the administration and 91 percent for members of Congress, thus placing interest groups among the most discussed actors. The case studies tell a similar story. Interest groups were coded as very important in 8 of the 23 cases, and somewhat important in an additional 9.

That first cut at the data masks some interesting finer points. For one thing, interest groups are much more prominent in the transportation than in the health interviews, as Table 3-1 shows.³ Many respondents attributed the difference to the lesser partisan cast of transportation issues. As one said:

Transportation is by and large made up of nonpartisan issues. Because of that, they bring into play congeries of special interest groups. You have the industrial

Table 3-1

Differences Between Health and Transportation on the Importance of Interest Groups

Importance	Health	Transportation
Very important	14%	55%
Somewhat important	62	41
Little importance	8	2
None	17	2
Total %	101%	100%
n	133	114

²My purpose is not to repeat the findings, theories, and arguments abroad in the interest group literature, nor to draw global conclusions about the degree of pluralism, elitism, or interest group liberalism in the political system at large, but rather to assess the impacts of interest groups on agendas and alternatives. For more general literature on interest groups, see David Truman, *The Governmental Process* (New York: Knopf, 1962); Raymond Bauer, Ithiel Pool, and Lewis Dexter, *American Business and Public Policy* (New York: Atherton, 1964); Mancur Olson, *The Logic of Collective Action* (Cambridge, MA: Harvard University Press, 1965); James Q. Wilson, *Political Organizations* (New York: Basic Books, 1973); and Terry Moe, *The Organization of Interests* (Chicago: University of Chicago Press, 1980).

³The case studies exhibit differences in the same direction, but not nearly as pronounced. Interest groups were coded as very or somewhat important in 10 of the 12 transportation cases, and in 7 of the 11 health cases.

interests, the railroads, the Teamsters, rail unions, suppliers, waterway users, construction industry, and then port cities with their own geographical interests, and steel and automobile companies.

A related reason for the difference between health and transportation is the lesser visibility of transportation issues in campaigns for elective office. Said one transportation respondent, "After all, transportation isn't exactly an exciting issue to most people. When the public isn't that involved in it, you have to deal with the vested interests." Generally, then, the lower the partisanship, ideological cast, and campaign visibility of the issues in a policy domain, the greater the importance of interest groups.

Types of Interest Groups

The discussion thus far has treated the Teamsters, the American Medical Association, urban mayors, environmental action groups, Ralph Nader's health group, and the Burlington Northern Railroad as all belonging to the same category. Let us briefly consider the place of each of several different types of interest groups: business and industry, professional, labor, public interest groups, and governmental officials as lobbyists.

When we think of interest groups, we often are thinking of business and industry. In the cases analyzed in this study, business interests are indeed the most often important of the interest groups, particularly in transportation. Business and industry groups are important in 9 of the 12 transportation cases, but in only 2 of the 11 health cases. That difference between the two policy domains is mirrored in the interviews. The power of the modal companies (e.g., railroads, airlines) is discussed as important in 46 percent of the transportation interviews, whereas the power of business is important in 24 percent of the health interviews.

Health has its counterpart to business and industry: the providers of medical care, grouped into such organizations as the American Medical Association (AMA) and the American Hospital Association (AHA). While we coded these groups as professional or practitioner groups rather than business and industry groups, many health respondents still refer to them as "the industry" in medicine. Indeed, such provider groups as the AMA and the AHA are prominently mentioned in fully 64 percent of my interviews, a figure even higher than that for modal companies in transportation, and such lobbies are important in 7 of the 11 case studies.

Organized labor is involved less frequently than the industry or professional groups just reviewed. They were important in the emergence of issues in only 5 of the 23 case studies, with no marked differences between health and transportation. They show up more frequently in the interviews; prominent in 41 percent of the health interviews and in 43 percent of the transportation interviews.

This apparent similarity between health and transportation, however, covers up a fundamental difference in the character of the involvement. Much of the discussion of unions among the transportation respondents concentrates on

blocking activity: Teamster opposition to trucking deregulation, railroad labor's opposition to measures designed to increase efficiency, and other union positions intended to preserve the current jobs of their members. Much of the health respondents' discussion, by contrast, centers on labor promotion of national health insurance, particularly on support by the United Auto Workers. Some of this promotion was attributed to union ideology, as reflected by the respondent who said, "I think the UAW really does have a tradition of idealism." But in a more self-interested vein, as medical care costs have increased dramatically over the last couple of decades, fringe benefit costs have loomed larger and larger at the bargaining table, making it harder for union leaders to deliver wage increases to their membership. National health insurance would remove the issue from collective bargaining, which would be particularly advantageous to a union such as the UAW since its health insurance benefits are impressively complete and thus unusually expensive. As one somewhat cynical respondent put it, "Labor wants the American taxpayer to buy them out of their benefit package."

Finally, such groups as consumers and environmentalists, labeled "public interest" groups, sometimes affect policy agendas. They are often discussed in the interviews as counterpoints to the self-interested groups in business, labor, and the professions. According to many respondents, the consensus that used to exist among the participating parties has diminished because of the emergence of these public interest groups on the scene. Highway-building interests used to dominate the highway program more than they do now, for instance, because of the recent and vigorous activity of environmentalists and local antihighway activists. As Hugh Heclo argues, the triangles between bureaucrats, congressional committees, and clienteles that used to dominate policy are no longer as iron as they once were.⁴

Akin to the public interest group is lobbying by governmental officials, particularly representatives of the states and cities. There is often a heavy budgetary impetus to the state and local interest in federal public policy. When mayors found that the privately run mass transit companies in their cities were failing, many cities took over the responsibility, resulting in substantial operating deficits and capital expenditures. Mayors turned to the federal government for relief, lobbying vigorously for a federal mass transit program. Similar entreaties from state officials have resulted in substantial federal programs in highway maintenance and bridge replacement. When health policy makers' attention turns to nationalizing the Medicaid program, one prominent consideration is the budgetary relief such a move would provide to the states.

Types of Interest Group Activity

Obviously, interest group activity is varied. Some of it affects the agenda; other activity affects the alternatives considered by policy makers. Some of it is pos-

itive, promoting new courses of government action; other activity is negative, seeking to block changes in public policy.

When we say that interest groups are important in agenda setting, we might conclude that they are promoting new agenda items or advocating certain proposals. Actually, much of interest group activity in these processes consists not of positive promotion, but rather of negative blocking. As we noticed in the case of transportation unions, interest groups often seek to preserve prerogatives and benefits they are currently enjoying, blocking initiatives that they believe would reduce those benefits. Thus regulated truckers in combination with the Teamsters put up a strong fight against trucking deregulation. Hints of increasing landing fees for general aviation (not-for-hire aircraft) and of imposing landing restrictions or requiring new equipment for them brought floods of outcry from pilots all over the country. The opposition of medical care providers to health insurance and other new health programs that they believe run counter to their interests is by now legendary. While it is not possible to estimate quantitatively how often interest group activity promotes a potential agenda item and how often it seeks to block consideration of an issue or an alternative, it is clear that a substantial portion of interest group effort is devoted to negative, blocking activities.

Interest group pressure does have positive impact on the government's agenda, and does so with considerable frequency. A group that mobilizes support, writes letters, sends delegations, and stimulates its allies to do the same can get government officials to pay attention to its issues. As one of my respondents described the way subjects rise through his department to the secretary's level due to group pressure, "Generally speaking, the louder they squawk, the higher it gets." Then when I asked him why other groups weren't paid much attention, he replied, "They don't come in very often; they just don't come in."

The interviews contained many examples of items on the governmental agenda because of interest group activity. The pressure by organized labor for national health insurance was one. As one respondent said, "The only driving force for national health insurance right now is the unions. Aside from them, there isn't any force in the public that really pushes for it." And pressure from the bus companies for their share of federal largess along with Amtrak led first to generalized attention to the problems of intercity buses and then to proposals for intermodal terminals that would combine train and bus, intercity and commuter traffic, and for new tax treatment for bus companies. Finally, health legislation is often aimed at particular disorders, partly because of the lobbies for cancer research, kidney dialysis, and other maladies, what several respondents called "the disease of the month club."

Despite these examples, it is still difficult to assign responsibility for the emergence of agenda items solely to interest groups. For one thing, issues generally emerge to a status of serious governmental consideration from a complex of factors, not simply interest group pressure. To return to the examples already discussed, attention to intermodal terminals may have been stimulated by pressure from bus companies, but it also grew out of a generalized sense among policy analysts and involved political decision makers that steps should be

⁴Heclo, "Issue Networks," op. cit.

taken to encourage a more integrated transportation system. Similarly, attention to national health insurance proposals arises from a complex of factors, not solely organized labor support.

Beyond the complexity of the process, many issues simply do not arise from interest group pressure. Jack Walker argues, for instance, that governmental attention to safety issues is not well understood in terms of an interest group model.⁵ As both he and Mark Nadel point out, political scientists who use a pressure group and conflict resolution theory should be surprised by the emergence of a Ralph Nader as an important influence on the governmental agenda.⁶ In more general terms, as Mancur Olson argues, interest groups that might promote the provision of collective goods do not readily form in the absence of coercion or of selective benefits to potential members.⁷ And as several other scholars point out, even those incentives do not explain the emergence on the American scene of some important political movements, notably consumers, environmentalists, and proponents of alternative energy sources.⁸

Even if an interest group raises an issue, furthermore, it doesn't necessarily control the debate once the issue is raised. Much as we discovered when analyzing the role of the president, a particular actor can sometimes get an issue on the agenda, but then can dominate neither the alternatives considered nor the outcome. Organized labor may have been a primary stimulus to governmental attention to national health insurance, for instance, but once the subject was on the agenda, they could not prevent the serious consideration of catastrophic insurance only, despite their extremely vigorous objections and their promotion of a comprehensive plan.

Indeed, a central interest group activity is attaching one's own alternative to agenda items that others may have made prominent. Lobbies often don't begin the push for legislation or the push for agenda status. But even if they haven't started the ball rolling, once it is rolling they try to insure that their interests are protected in the legislation that emerges. In our terminology, they affect the alternatives considered, even if they haven't affected the agenda. Once talk of national health insurance became serious in the 1970s, for instance, even the American Medical Association introduced a plan of its own, despite its previous bitter opposition. As one source close to AMA thinking put it, "The average physician is not overjoyed with national health insurance. But as a practical

⁵Jack L. Walker, "Setting the Agenda in the U.S. Senate," *British Journal of Political Science* 7 (October 1977): 423-445.

⁶Mark V. Nadel, *The Politics of Consumer Protection* (Indianapolis: Bobbs-Merrill, 1971), Chapters 5 and 7.

⁷Olson, *The Logic of Collective Action*, op. cit.

⁸Jeffrey Berry, *Lobbying for the People* (Princeton: Princeton University Press, 1977); Nadel, *The Politics of Consumer Protection*, op. cit.; Robert Salisbury, "An Exchange Theory of Interest Groups," *Midwest Journal of Political Science* 13 (February 1969): 1-32; and Andrew McFarland, *Public Interest Lobbies* (Washington, D.C.: American Enterprise Institute, 1976).

matter, if it looks like it's coming, we want the best possible bill that we can get." A congressional staffer added, "By adopting one national health insurance plan rather than another, you are either reinforcing the existing system or bringing about very great changes. When that's at stake, everybody with any interest in it leaps in to protect his own turf: the commercial insurance industry, the Blues [Blue Cross and Blue Shield], the hospitals, the practicing doctors, organized labor."

Thus interest groups are central to the processes under scrutiny here, as our first look at the quantitative indicators suggested. But they are important in a variety of ways, not simply as agenda agents. Indeed, the actual creation of policy agenda items by interest groups may be a less frequent activity than blocking agenda items or proposing amendments to or substitutions for proposals already on the agenda.