

The Association Between Perceived Healthcare Adequacy and 2024 Presidential Candidate Choice



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Introduction

- The US spends more on healthcare than any other large, wealthy country. On average, other large wealthy countries spend about half as much on healthcare per person as the US (Emma Wager et al., 2025).
- Roughly two-thirds of Americans say that the government has a responsibility to ensure all of its citizens have access to healthcare (Andrew Daniller, 2026).
- The 2024 presidential election offered an opportunity to examine whether respondent's opinions on US healthcare adequacy varies by candidate preference, given the sharp partisan divide over healthcare policy between Kamala Harris and Donald Trump.
- Introducing respondent's concerns in health insurance costs allows us to examine how individual healthcare worries relate to opinions on US healthcare adequacy and candidate of choice.

Methods

Sample

- The 2024 ANES Timeseries Election Survey is a nationally representative sample of the US voting-eligible population.
- After listwise deletion of missing values on all analysis variables, the analytic sample consisted of respondents (N=3,531) who reported voting for either Kamala Harris or Donald Trump. Third-party voters, refusals, and "don't know" responses were excluded.

Measures

- Candidate voter for (DV) was assessed as a binary variable (0 = Harris, 1 = Trump) with third-party candidates set to missing.
- Respondents answered "How well does our political system guarantee adequate healthcare for all citizens?" on a scale of 1 (Not well at all) to 4 (Very well).
- Respondents answered "How concerned are you about paying for healthcare?" on a scale of 1 (Not at all concerned) to 5 (Extremely concerned).

Research Questions

- How do voters opinions on the US healthcare system and individual concerns about paying for health insurance relate to their chosen candidate in the 2024 presidential election?
- To what extent is there correlation between the level of US healthcare satisfaction and the level of health insurance cost concerns among voters?

Results

Univariate

- 70.6% of respondents said the US guarantees healthcare for all citizens either "Not very well" or "Not well at all".
- 55.9% of respondents voted for Kamala Harris vs. 44.1% for Trump.

Bivariate

- Chi-Square analysis showed that respondents who believed the US political system guarantees healthcare not very well or not at all **were significantly more likely to vote for Harris** (82.1%) than those who believed the system performs well (18.5%), $\chi^2(3) = 343.02, p < .0001$.
- As expected, opinions on government healthcare spending were significantly associated with voting for Trump, OR = 2.25 (2.06-2.45).

Multivariate

- Trump voters rate the healthcare system as more adequate than Harris voters across every level of health insurance cost concern.
- Trump voters with the highest cost concern (Level 5) still rate the system about as adequately as Harris voters with the lowest cost concern (Level 1) suggesting a persistent partisan gap in evaluation of healthcare adequacy that exists independently of personal insurance cost anxiety.
- Opinions on US healthcare adequacy and chosen candidate were each significantly associated with concern about paying for health insurance.
- Trump voters reported substantially higher concern about paying for healthcare than Harris voters at every level of perceived system adequacy

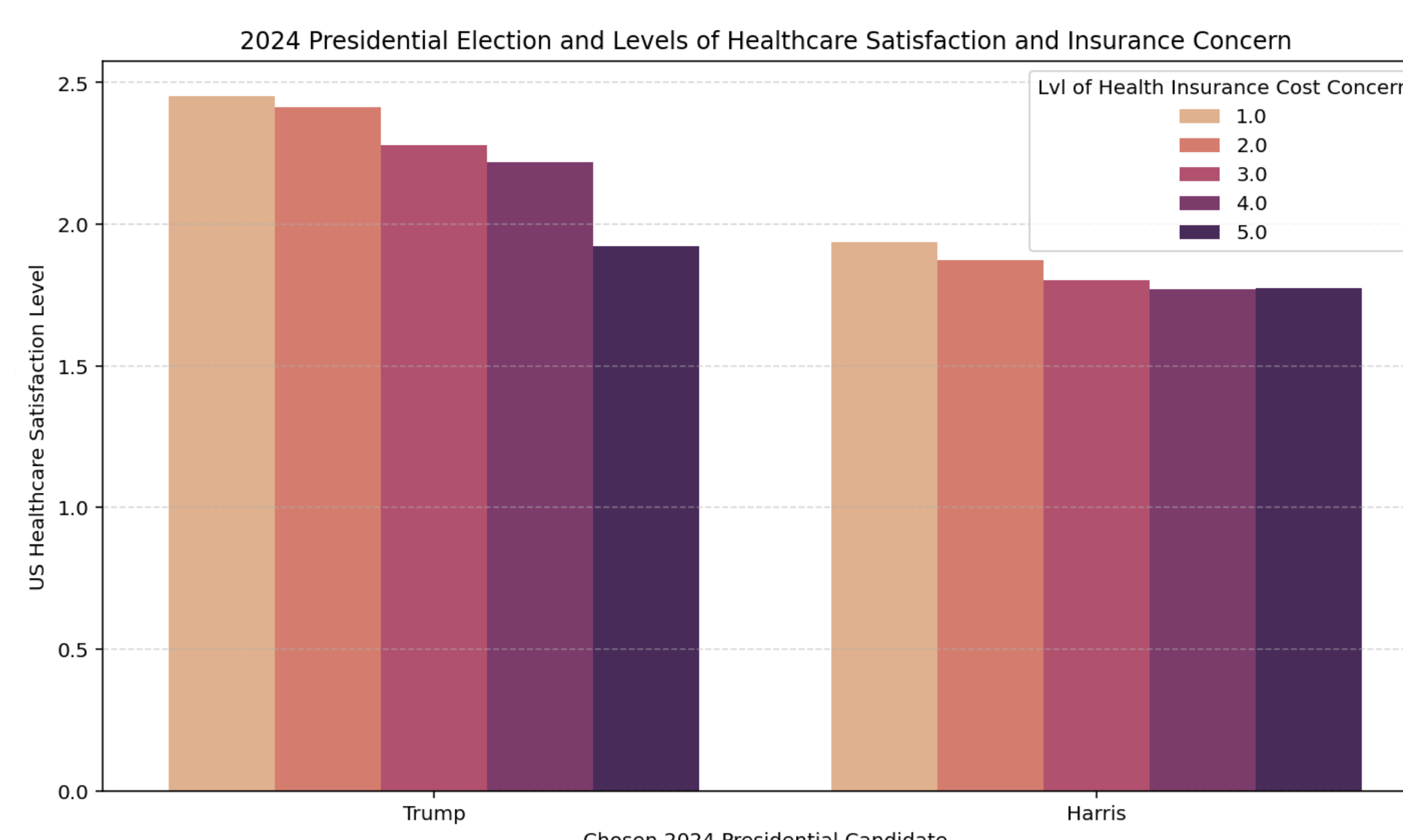


Figure 1. Mean US healthcare satisfaction level by 2024 presidential candidate choice, stratified by level of health insurance cost concern.

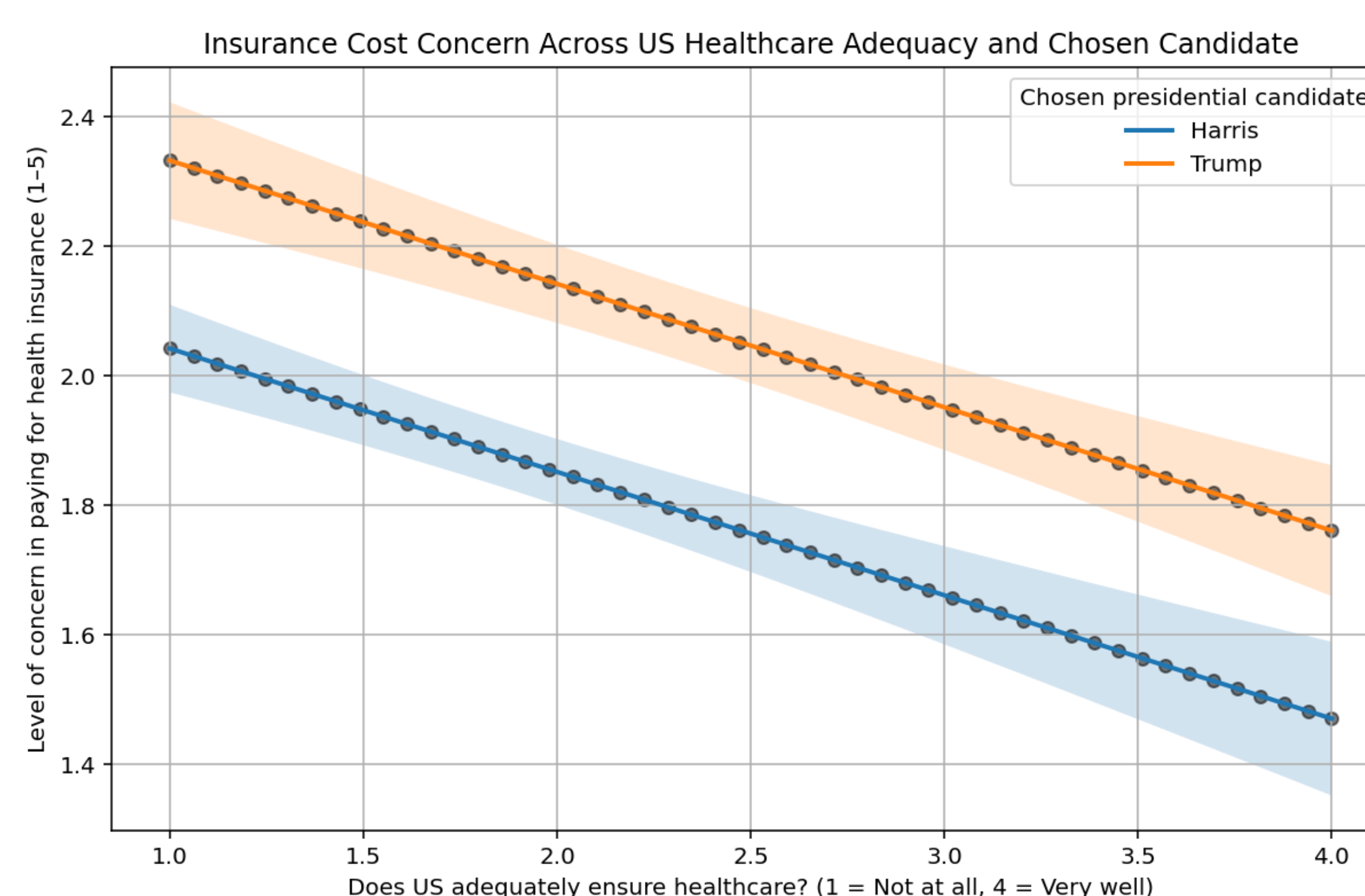


Figure 2. OLS-predicted concern about paying for health insurance across levels of perceived healthcare system adequacy, stratified by 2024 presidential candidate choice. Shaded bands represent 95% confidence intervals.

Discussion

- Perceiving the healthcare system as more adequate was associated with **lower concern** about paying for healthcare; a consistent negative relationship for both candidate groups (Figure 2).
- Trump voters reported greater concern** about paying for health insurance than Harris voters at every level of adequacy, despite also rating the US healthcare system as more adequate.
- Notably, the present findings are by cross-sectional design; causal direction cannot be established
- Future research should incorporate insurance coverage, household income, and other demographic covariates to better isolate the predictors of health insurance anxiety.

Daniller, A. (2025). Most Americans say the government has a responsibility to ensure health care coverage. Politics & Policy. pewresearch.org, Pew Research Center.
Emma Wager, M. M., Shameek Rakshit, and Cynthia Cox (2025). "How does health spending in the U.S. compare to other countries?" Health System Tracker. healthsystemtracker.org, KFF.
Studies, A. N. E. (2025). ANES 2024 Time Series Study Full Release [dataset and documentation]. August 8, 2025 version.

- The interaction between perceived healthcare adequacy and candidate choice was not found to be associated with level of insurance cost concern.
- As indicated by the parallel slopes in Figure 2, the relationship between healthcare adequacy and insurance cost concern does not meaningfully differ between Trump and Harris voters.