



## **Rhetoric, Policy, and Medicine: An Analysis of the Effects of COVID-19 on Florida Policymaking**

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### **Abstract**

As with most institutions in the United States, healthcare is subject to its own unique set of issues, the largest of which pertain to the quality of and access to medical care. These issues were initially spawned at the federal level and currently still exist on a national scale; however, due to the political structure of the U.S., statewide governments have a large hand in the control and dispersal of medical care. With the onset of the COVID-19 pandemic, greater emphasis has been placed on the installment of public health measures like Coronavirus testing, mask-wearing, and vaccination, as a response to the shortcomings of clinical care; a result of this public health emphasis is a heightened need for governmental regulation of healthcare at a statewide level. This meta-analytical study aims to assess the role of political rhetoric in regulating healthcare amid COVID-19, specifically within the state of Florida. Applying a rhetorical lens to the politico-medical intersection has yielded four overarching means of general healthcare regulation: legislation, executive order, speech, and action. These four political extensions of rhetoric have each played a role in managing the health and livelihood of Florida residents throughout the COVID-19 public health crisis, and the assessment of these extensions has immediate implications with regard to understanding the issues of the U.S. healthcare system in other states, and on a federal level. Beyond this, analyzing the role of rhetoric in the politico-medical relationship may also help improve and understand the conditions of both institutions in many contexts.

*Keywords:* rhetoric, policy, medicine, healthcare, politico-medical, COVID-19, pandemic

### **Introduction**

Aristotle once defined rhetoric as “the ability, in each particular case, to see the available means of persuasion” (BYU, n.d.).

Healthcare systems worldwide differ vastly from country to country. In alignment with the wide variety of cultural, economic, and political systems around the planet, healthcare systems form and develop differently to cater to the needs of their respective populations. Within the U.S., the responsibility of the government to cater to its people has given rise to a wide array of issues that now stand between most U.S. citizens and their health. Inaccessibility to quality healthcare stands at the pinnacle of the mountain of healthcare inadequacy; however, issues like

defensive medicine/waste (Sekhar & Vyas, 2013) and high costs of care and pharmaceuticals continue to pile up and defile the magnificence of the prized diversity within the “melting-pot” that is the United States. Over half of U.S. adults claim that current medical care “creates more problems than it solves” due in large part to these deficiencies of healthcare accessibility (Milanez & Strauss, 2018).

Thus, in order to begin understanding and mending the issues that have arisen, and are still arising, from the governmental management of the institution of healthcare in the U.S., it is necessary to understand the relationship between the two. Further, the deep-seated role of rhetoric in democratic government operations (Dryzek, 2010) highlights the usefulness of rhetoric as a lens through which to analyze the politico-medical relationship throughout the United States. This study aims to rhetorically analyze the politico-medical relationship as it is influenced by the COVID-19 pandemic in the state of Florida through the application of four overarching modes of political rhetoric: legislation, executive order, speech, and action. Additionally, this study has wide implications in furthering the general understanding surrounding the politico-medical relationship be it in the context of different states, or throughout the nation as a whole.

### **Background**

The problems experienced by the U.S. healthcare system are the products of years of influence from the history upon which the U.S. stands. The issue of accessibility to care is tied directly to the development of the U.S.’s capitalistic free-market economy (McKee & Stuckler, 2012); the WW2 wartime economy, the great depression, and the 1942 stabilization act forced the need for employer-based insurance (Carroll, 2017), which has slowly transformed into the creation and passage of Medicare, Medicaid, and the Affordable Care Act. Intrinsicly, the need for such policy indicates a failure on the part of the U.S. government. Furthermore, the COVID-19 pandemic has placed extreme stress upon healthcare institutions across the country with hospitals reporting staffing shortages, financial instability, the exacerbation of existing health disparities, and difficulties in vaccine provision (Grimm, 2021). The COVID-19-induced failure of the government to successfully use clinical medicine to satisfy the medical needs of its respective population is a signal to switch gears; preventative care and public health stand as a beacon amid the fog brought about by the current turning point that is COVID-19.

Currently, the essence of preventative care is being slowly woven into U.S. citizens' daily lives to prevent virus transmission with measures like mask-wearing, regular testing, and vaccination becoming commonplace; these three practices are the epitome of public health, and their proven success in reducing the impact of the pandemic (CDC, 2021) are a greenlight to rely on public health measures more than ever before. Preventative practices that took decades to tighten their grasp upon the planet have taken mere weeks to achieve the same command over the world; the preventative-ness of mask-wearing mirrors the conception of handwashing, the incredibly fast development and spread of the COVID vaccine nods to the advent of penicillin, and the effectiveness of frequent COVID testing calls back to the life-saving nature of pre-screening for countless lethal conditions. Meanwhile, hospitals nationwide are in disarray, forced to turn local patients away because they lack the capacity to carry out the sole task for which they were created: to heal (Grimm, 2021). COVID-19 is the perfect relay point at which clinical medicine must hand the baton to public health.

The preventative versus clinical medicine dilemma outlined above is not one that can be solved through policy implementation alone; rather, policy is one of many forms of rhetoric which the government uses to push its agenda. Simply mandating something conducive to a population's health by law does not guarantee that it will catch on and persist, due in large part to the diversity of the United States. The diversity of this country highlights the importance of sociocultural norms in the context of populational health; the idea that "social norms exert a powerful influence on people's behavior in many arenas...and are often neglected in the design of policy" (Young, 2007) must be accounted for in this discussion. Taking advantage of the U.S. population's norms using the manipulative procedures of government rhetoric to weave desired ideals, morals, and ethics into the fabric of such sociocultural norms could yield effective results. This concept is fittingly illuminated in the immediate context of COVID-19 vaccinations. A study of social norms found that "young adults' estimates of the percentage of typical young adults that will get a COVID vaccine...and estimates of how important typical young adults think COVID vaccination is...were both significantly associated with self-reported intentions and perceived importance of COVID vaccination" (Graupensperger et al., 2021). These recent findings further validate the real, yet underutilized nature of socio-cultural norms, especially amid the current pandemic. Per a 1973 analysis of norms and policy, "among the many factors constantly at work to change the setting of these tacit norms, one is explicit mutual persuasion"

(Vickers, 1973), which lends great support to the idea that rhetoric, simply referred to as “persuasion” in this scenario, is hard at work in the background of government, medicine, and their intersection.

### **Defining Politico-Medical Rhetoric and Its Place in the State of Florida**

Modern societies, and the way they exploit the well-studied methods of rhetoric, closely mirror similar principles in older societies, arguably the most prominent of which being ancient Greece. Of the similarities between the contemporary U.S. and ancient Greece is the latter’s undeniable influence on the democratic political system of the former (Fleck & Hanssen, 2006). The democratic structure of Greek politics carried with it the intense and thorough influence of rhetoric cultivated by philosophical powerhouses of the time, like Aristotle.

To define rhetoric as it relates to policy and medicine, the essence of the rhetorical intersection of government and medicine must be clarified; the essence in question is what each respective institution’s definition of the other is. In the eyes of the government, medicine is a body responsible for healing the population which it oversees. To medicine, government is a body responsible for maintaining its organization and directing its resources. These definitions firmly stand as the foundation upon which the rhetoric of these institutions can build, tailoring tried and tested rhetorical constructs to what is required for policy and medicine to maintain the balance of their contingent needs. Both definitions imply the heavy reliance of these institutions on one another, which highlights precisely why the difficulties of controlling COVID-19 are so conflated with the ongoing scrimmage of both government and medicine’s rhetoric.

It is no surprise that government, and the policies, press releases, and orders it generates, strongly illustrate the power of both flawed and sound rhetoric; the larger the audience in question, the more general and blatant the rhetoric in use must be, and the government oversees what is arguably the largest audience of any of its fellow institutions. The inability of the government to appeal to its entire audience in any single one of its undertakings emphasizes a prominent root of the issues present in every respective institution it oversees, including medicine. Put simply, the vast differences in the races, ethnicities, nationalities, religions, political standings, among other characteristics, of virtually every American citizen yield what is undeniably the most complicated rhetorical audience (National Academies of Sciences, Engineering, and Medicine, 2017), an audience to which the government must appeal. Given the

rhetorical complication characterized by the responsibility of a nation's entire population, the government has equipped itself with a respective solution, a multitude of rhetorical tools with which it attempts to maintain order: legislation, speech, executive order, and action.

### **Legislation**

Interestingly, under the lens of Aristotle's three means of persuasion, it is immediately obvious that legislation relies almost entirely on the arguments proposed by the laws in question, corroborating the importance of rhetoric in governance (Rapp, 2002). However, prior to discussing the effects of rhetoric by legislation in the state of Florida the distinction between an executive order and a law must be clarified; while a law requires a congressional signature for its passage, an executive order does not (American Bar Association, 2021). Rather, an executive order, which has the same effect as law, is only signed by a president or governor, upon which it goes into effect (American Bar Association, 2021). While both executive orders and legislation are passed by the hand(s) of people who were collectively voted into office by a population, only legislation is subject to the judgement of multiple people, beginning with a collective agreement upon the election of an official and ending with the passage of a law after a rigorous legislative process. Executive orders, on the other hand, are constructed by individuals.

During the COVID-19 pandemic, only one implementation of long-term policy has been passed within the state of Florida thus far. This single legislative effort also bore little relevance to the immediate dilemma of protecting Florida residents' health; rather this legislation, the "Protect Florida Jobs" bill, worked to oppose the COVID-19 vaccine mandate in schools and workplaces (Florida Government Staff, 2021). An officially-released document summarizing the bill went so far as to state that "no healthy child should be barred from learning because of a school board's radical policies" (Florida Government, 2021); the specific use of a term like "radical" by a state government is especially indicative of the rhetoric that is woven into legislation.

### **Speech**

Rhetoric by speech finds itself well-aligned with the traditional rhetorical means of persuasion that focus on the character of the speaker and the emotional state of the listener (Rapp, 2002). The credibility and character of a government official or politician, by way of their

election and placement in their profession, as well as the emotional state of citizens, characterized by their emotionally-charged political standings, both play a heavy role in determining the result of speech-based rhetoric within government.

Given the extreme worldwide media presence of the COVID-19 pandemic, it is to be expected that rhetoric by speech plays a large role in humanity's reaction to it. An idea central to the discussion of rhetoric by speech is most aptly summarized in Wayne Booth's *The Rhetoric of Rhetoric* in which he lays the groundwork for his rendition of the politico-rhetorical relationship. In his book, he describes delocalization as the largest issue with political rhetoric; that is, contemporary politicians and the "unofficial" rhetoric they peddle by way of their words, behaviors, and actions, are subject to criticism and opinion by all who have the ability to observe them (Booth, 2004). In the past, technology did not have the capacity to allow such rapid and efficient communication; despite this, the panopticon that is contemporary media has now set itself up in a way where the rhetoric by speech of politicians and other government entities is not perceived only by those who it was intended for. Such delocalization of rhetoric is what has permitted rhetoric by speech to become especially relevant and powerful today, as it facilitates the development of opinions by individuals on all sides of any given issue.

A good example of the effects of COVID-19 related rhetoric by speech in the state of Florida is the stark divide between those who agree and comply with the widespread mask-wearing sentiments and those who don't. In July 2021, Governor Ron DeSantis issued an executive order that allowed parents to choose whether or not to allow their children to wear masks to school (DeSantis, 2021); this strong example of rhetoric by executive order went on to indirectly spark intense political discourse that is closely aligned with the definition of rhetoric by speech. In fact, this executive order, in true delocalized fashion, was subject to the criticism of President Joe Biden, who was certainly not the intended target of DeSantis' legislative rhetoric. Biden, in a press conference, reacted directly to DeSantis' order, stating that it was "bad health policy" (The White House, 2021). This statement, alongside the rest of his words condemning the governors who did not comply with his own opinions on COVID-19 management, has massive implications in directing the actions and thoughts of these local governors as well as the citizens they are responsible for. Following Biden's disapproval, DeSantis responded negatively to the U.S. president (WJHG Newsroom, 2021). Aligned with the principles of psychology, such rhetorical interactions give rise to the convenient formation of confirmation biases in which

people on either side of the mask-wearing debate can look to the rhetoric of their leaders to support their decisions and opinions; this is arguably the largest effect of rhetoric by speech.

### **Executive order**

Rhetoric by executive order is largely rhetorically characterized by the command-like nature of a single authoritative politician's directives. Such rhetoric has been used in quite high concentrations not only throughout history, but also as a useful tool to mediate the ongoing pandemic's effects. Directives like lockdown protocols have been put in place as a result of executive orders, whether they be on the federal or state level (DeSantis, 2020). Such measures have proven to be incredibly effective in managing populations due to their acute purposes and fast-acting nature. The rhetoric of executive orders sacrifices the widespread and consensus-based nature of traditional legislation in that they respond to specific stimuli by way of a single figure's decision, requiring only an individual signature for their passage. As a result, this rhetorical tool has played a key role in the mitigation of the COVID-19 pandemic at the hands of state governors nationwide.

The reality of COVID-19-related executive order-based rhetoric in Florida exists in the form of six executive orders issued by Governor Ron DeSantis (Florida Government, 2022). All of these executive orders pertain either to the lockdown protocol following the early proliferation of the virus, or mask-wearing mandates (Florida Government, 2022). Similar to legislation, there is a relative lack of executive orders passed amid COVID-19, especially ones that have long-term implications in the correction of Florida's vulnerabilities to this pandemic and future ones.

### **Governmental Action**

Rhetoric by way of governmental action is not directly administered to its target population; rather, this form of governance indirectly uses rhetoric to incite action with the intent of manipulating a target audience. Particularly evident in the wake of COVID-19, rhetoric-influenced action can be simply perceived in the methods by which the government delegates physical actions to its subordinate bodies. In the context of medicine and public health, organizations on the federal level, like the Centers for Disease Control and Prevention (CDC) and the National Institute of Health (NIH), and organizations on the state level like each state's respective department of health, engage majorly in rhetoric-influenced action (this is not to say

they do not take part in the other modes of rhetoric dispersal). Health-related undertakings like educating populations and, especially present amid the current pandemic, facilitating testing, statistical analysis, and vaccination, are particularly representative of rhetoric by action. In conjunction with the escalation of COVID-19, rhetoric by action has crept its way into the politico-medical spotlight, standing above rhetoric by legislation, executive order, and speech as one of the most effective rhetorical tools in mending the immediate damages of the ongoing pandemic.

The concept of rhetoric-influenced action is quite fittingly embodied by the Florida Department of Health (FDOH). As a direct extension of the federal government's executive branch, the FDOH is largely responsible for Florida's public health affairs. As a result, the FDOH is strongly dedicated to the cause of COVID-19 and its action-based, rhetoric-spawned, efforts are most appropriately recognized in the form of the rapid spread of both COVID-19 testing sites and vaccines (FDOH, 2022); as of Spring of 2022, the FDOH is partially responsible for the vaccination of over fifteen-million Floridians (FDOH, 2022). When considered alone, these mechanisms of rhetoric-influenced action provide perfect examples of governmental rhetoric and the drastic effects it can have on those who it is targeted towards; this kind of rhetoric has the capacity to determine the fate of a person's life or alter their biology. When considered in context, it becomes obvious that rhetoric-influenced action serves a variety of other purposes beyond that for which it was designed; this rhetoric-influenced action gives rise to rhetoric of its own, spreading hope and trust in the process.

### **Conclusion**

Although the Florida state government comprises only a small fraction of the United States' stratified governmental system, an analysis of its role in influencing citizen health amid the current pandemic reveals the important use of rhetoric in achieving its goals. Ample evidence exists to support the influence of such rhetoric on citizen health by way of the four modes discussed above: legislation, speech, executive order, and action. Only one form of Floridian legislation that addresses the COVID-19 pandemic has been passed since the initial onset of the pandemic in 2020, lending support to the larger influence of the other three modes of governmental rhetoric. Six executive orders have been signed by Governor Ron DeSantis, all of which pertain to the implementation or removal of mask wearing and lockdown protocols.



Speech-related rhetoric produced by politicians and official figures have dominated the nationwide response to the pandemic largely through the considerable media coverage of the pandemic, as well as through the use of social media outlets like Twitter. Rhetoric-based governmental action in the context of healthcare presents itself at an unforeseen level with the progression of the virus. The vast majority of preventable health issues since the beginning of the pandemic have been accounted for largely by the swift actions taken by the U.S. government's substituent organizations on both a national and statewide level, with the FDOH maintaining jurisdiction in Florida in this regard.

Throughout history the role of government in medicine, while beneficial in a wide variety of ways, has always given rise to its fair share of issues which have continued to affect the institution of healthcare, and by extension, the health of those under that institution. By developing a more thorough understanding of government in unique situations that pose unprecedented challenges, like the COVID-19 pandemic, some of the flaws in the governmental management of medicine can be addressed. The strengths of government in these unique situations can be wielded in other contexts to further bolster the institutions it so closely oversees. The rhetoric that underlies government functions provides an organized perspective on such strengths and weaknesses, as well as how they can be applied. To extend the findings of this study, more research should be conducted on the role of rhetoric in the politico-medical relationship in other states, as well as on a national level. A limitation of this study was the recency with which it was performed; the COVID-19 pandemic still plagues the world today, and with time, more concrete implementations will be put in place to address it, which can alter the politico-medical relationship amid the pandemic. However, an immediate analysis of rhetoric, government, and medicine and how COVID-19 has manipulated them certainly has useful implications in highlighting and mending the issues present in U.S. healthcare today.

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