FRAME
WORKS

Raising Health Equity Issues Effectively

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Forum on Racism & Health

Framing questions we'll explore today

- What cultural mindsets get in the way of efforts to eliminate racial disparities and their root causes in systems, structures, and policies?

- What common ways of talking about racial inequity don't work as intended?

- What tested communication strategies can we use to build more urgency and support for advancing health equity?

Research base for today (and available to you!)

- Ways public thinking is changing - and staying the same - in this moment of **cultural disruption (**supported by the Ford Foundation & many others)

- How to build support for **equity-focused approaches to tobacco prevention and control** with the CDC Office of Smoking & Health and ChangeLab Solutions

- How to build support for eliminating **oral health disparities** with the Oral Health Progress and Equity Network and the DentaQuest Foundation

- How to center race equity in nationwide efforts to reduce **disparities in maternal and infant health** outcomes, with the Prematurity Prevention Collaborative and March of Dimes

- How to **reduce ageism** and advance health equity in later life, with Leaders of Aging Organizations

- How to spark more productive dialogue about **gun violence prevention** in places with a strong pro-gun culture - supported by the Missouri Foundation for Health

- How to shift thinking about the **role of housing** in health & society - supported by Enterprise Community Partners, Knight Foundation, Purpose Built Communities, and others

- How **environmental health** challenges perpetuate health inequities, with the American Public Health Association and the CDC National Center for Environmental Health

Why framing matters

The connection between communication
choices and more equitable outcomes

Framing shapes understanding

– Framing is the process of making choices about how to present ideas

– Choices include where to start, what to emphasize, how to explain it, what commitments to invoke, and what to leave unsaid.

– The way we frame our issues influences how people think and feel about them, and what actions they are willing to take or support

Framing can open minds - or close them

Selected results from experimental survey FrameWorks conducted in Australia, 2018

Policy support relative to control

* = P<.01

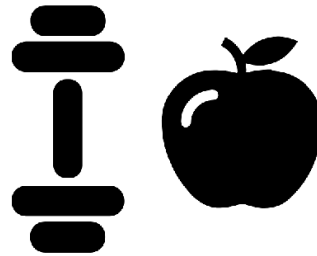"Effective parenting" "What children need"

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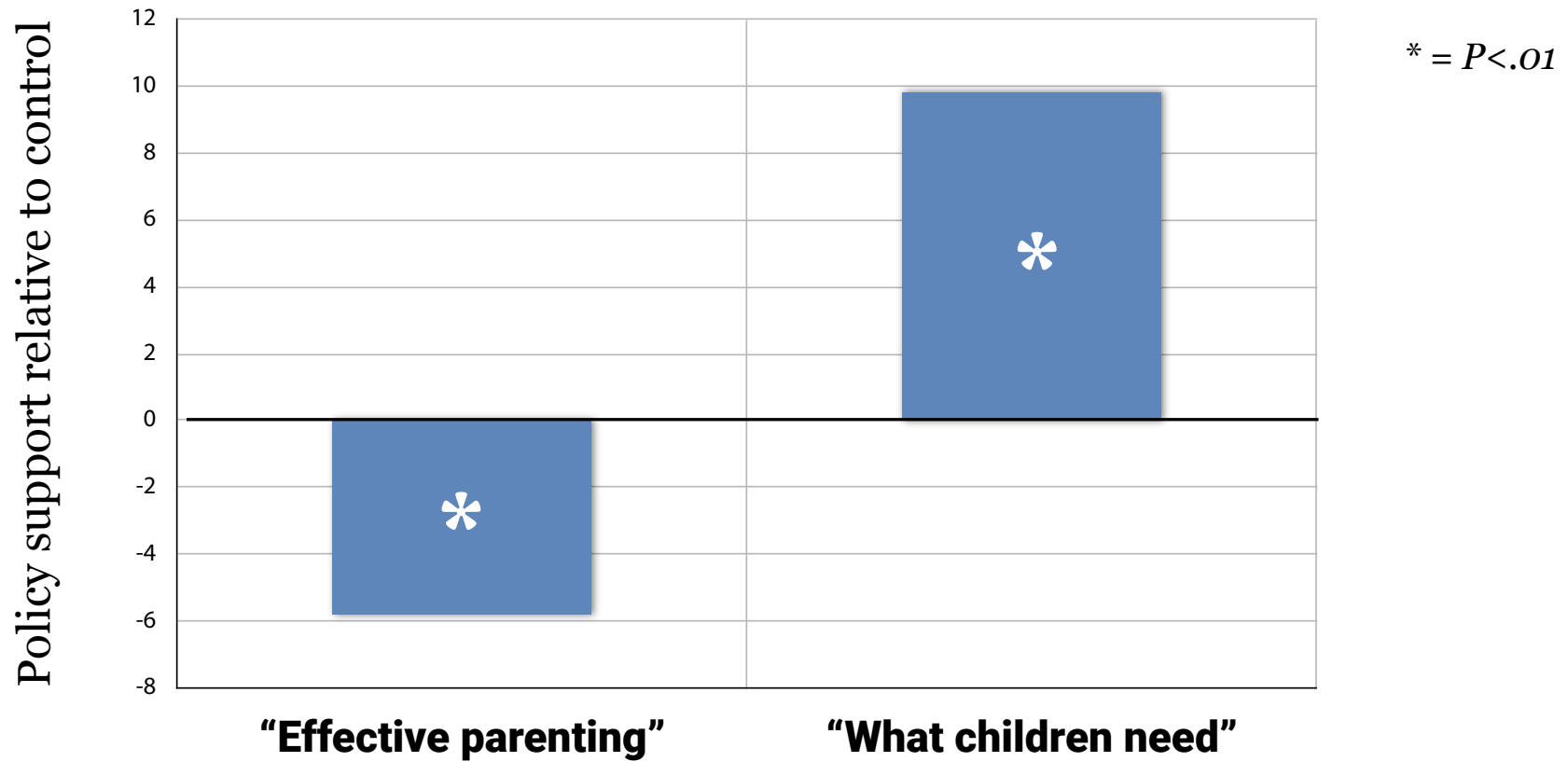
health equity

"

Education

Common mental models of health

Individualism
Assumption that the causes of health/illness - and their benefits/ consequences - happen entirely at the individual level.

Diet + Exercise = Health
Assumption that personal lifestyle - and mostly choices about food and physical activity - are the main drivers of health outcomes.
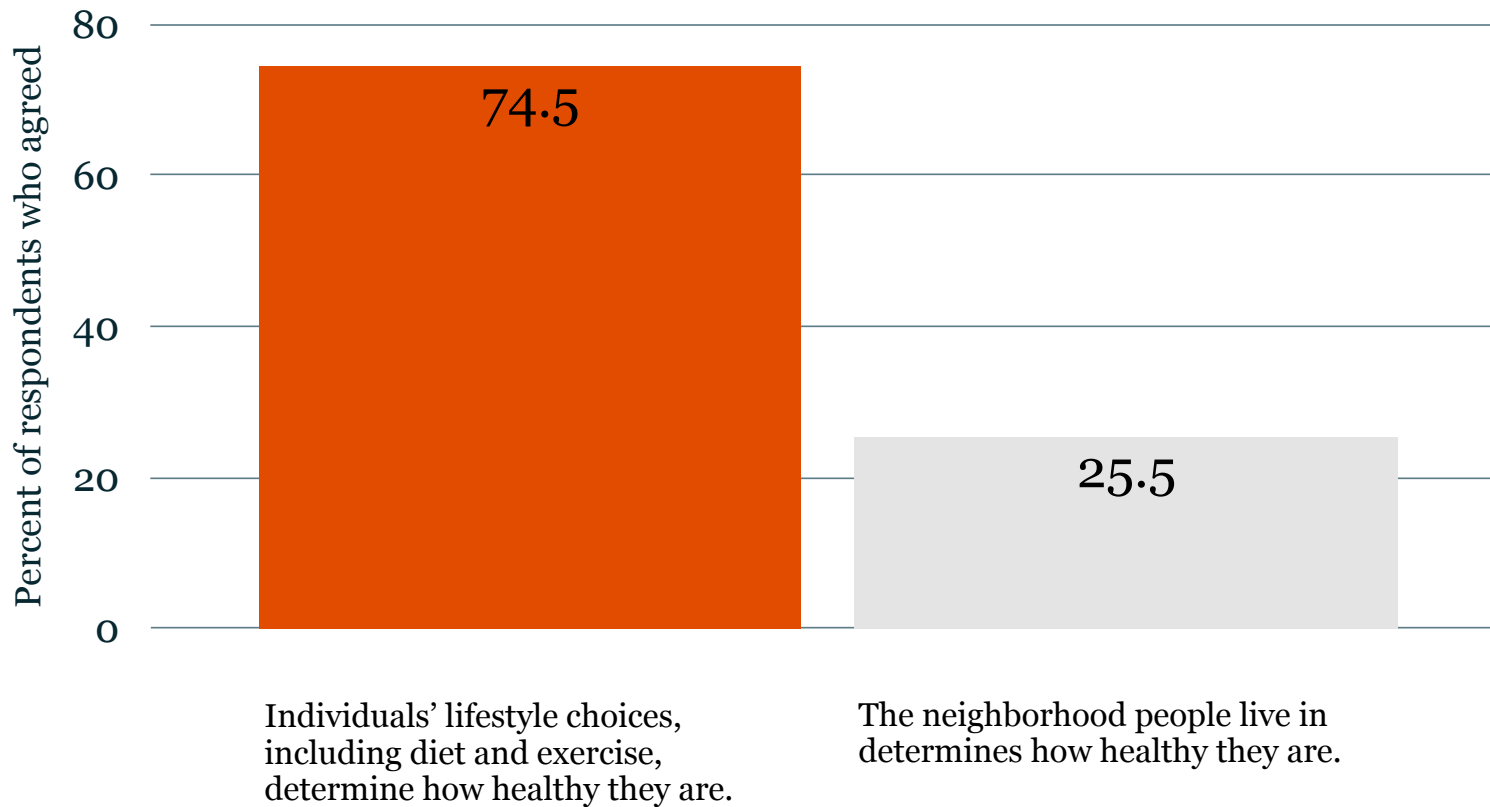
Solution = Awareness
Assumption that the best way to influence health outcomes is to provide individuals with information to guide personal choices.
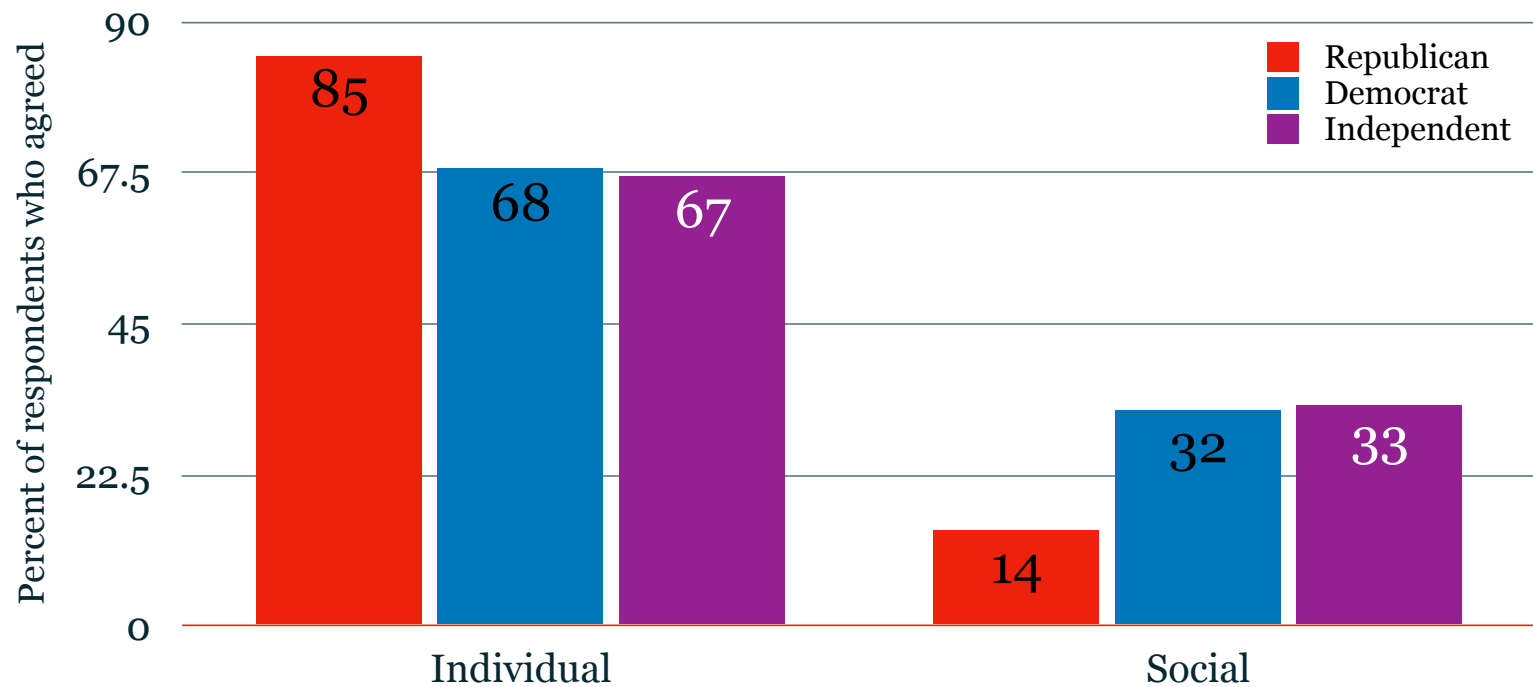
Health individualism remains strong despite pandemic

Selected results of FrameWorks' national 'culture change' tracking survey, October 2020

Percent of respondents who agreed

80	
	74.5
60	
40	
	25.5
20	
0	

Individuals' lifestyle choices, including diet and exercise, determine how healthy they are.

The neighborhood people live in determines how healthy they are.

Health individualism cuts across ideology (somewhat)

Selected results of FrameWorks' national 'culture change' tracking survey, October 2020

Percent of respondents who agreed

- Republican
- Democrat
- Independent

	Individual	Social
Republican	85	14
Democrat	68	32
Independent	67	33

Individuals' lifestyle choices, including diet and exercise, determine how healthy they are.

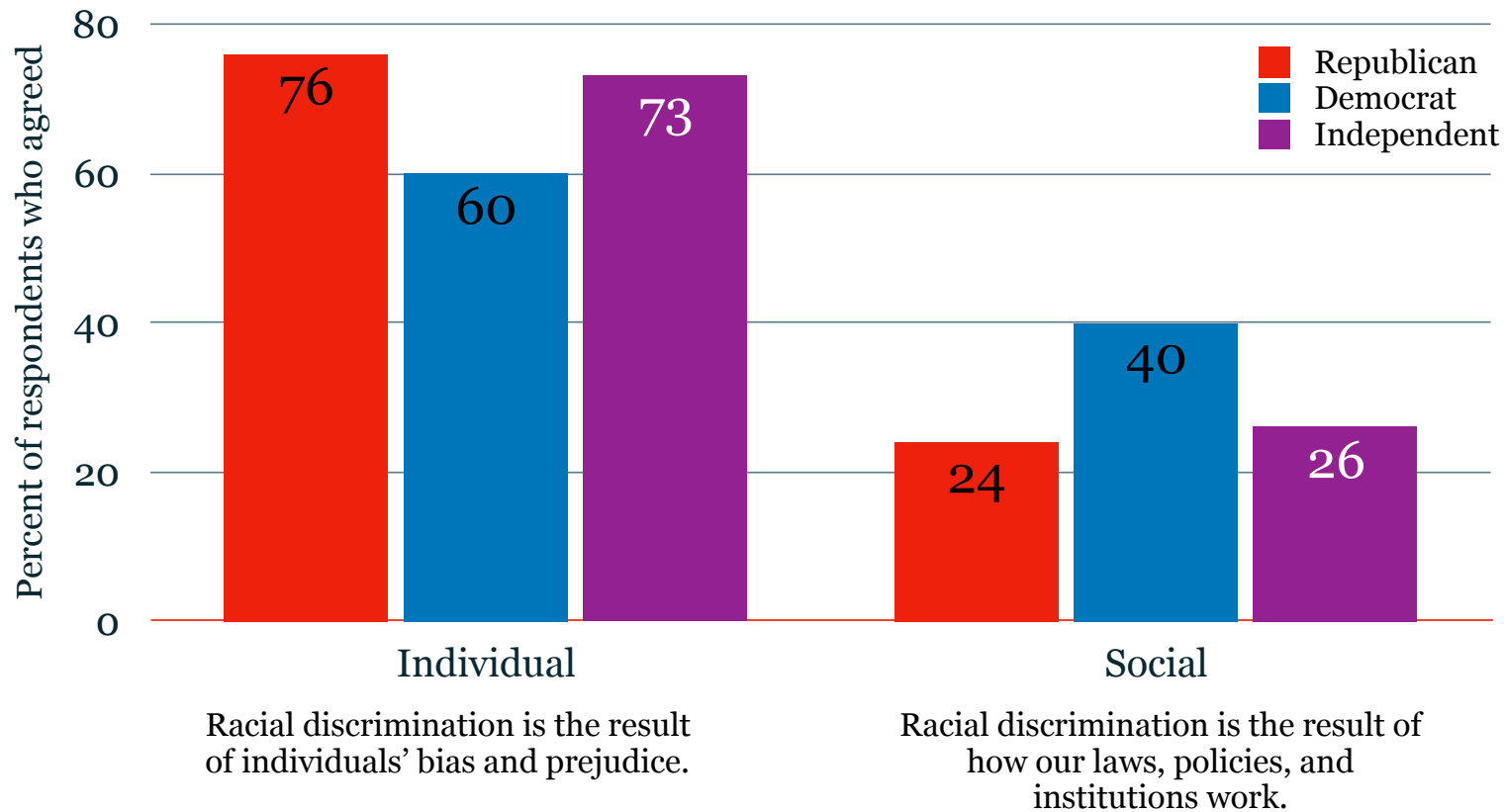The neighborhood people live in determines how healthy they are.

"health equity"

Most Americans think racism is interpersonal, not structural

*Selected results of FrameWorks' national 'culture change' tracking survey, October 2020*

Percent of respondents who agreed

80

60

40

20

0

Republican
Democrat
Independent

76

60

73

24

40

26

Individual

Social

Racial discrimination is the result of individuals' bias and prejudice.

Racial discrimination is the result of how our laws, policies, and institutions work.

Mental models of "the other" shape understanding of health disparities

Cultural Pathology

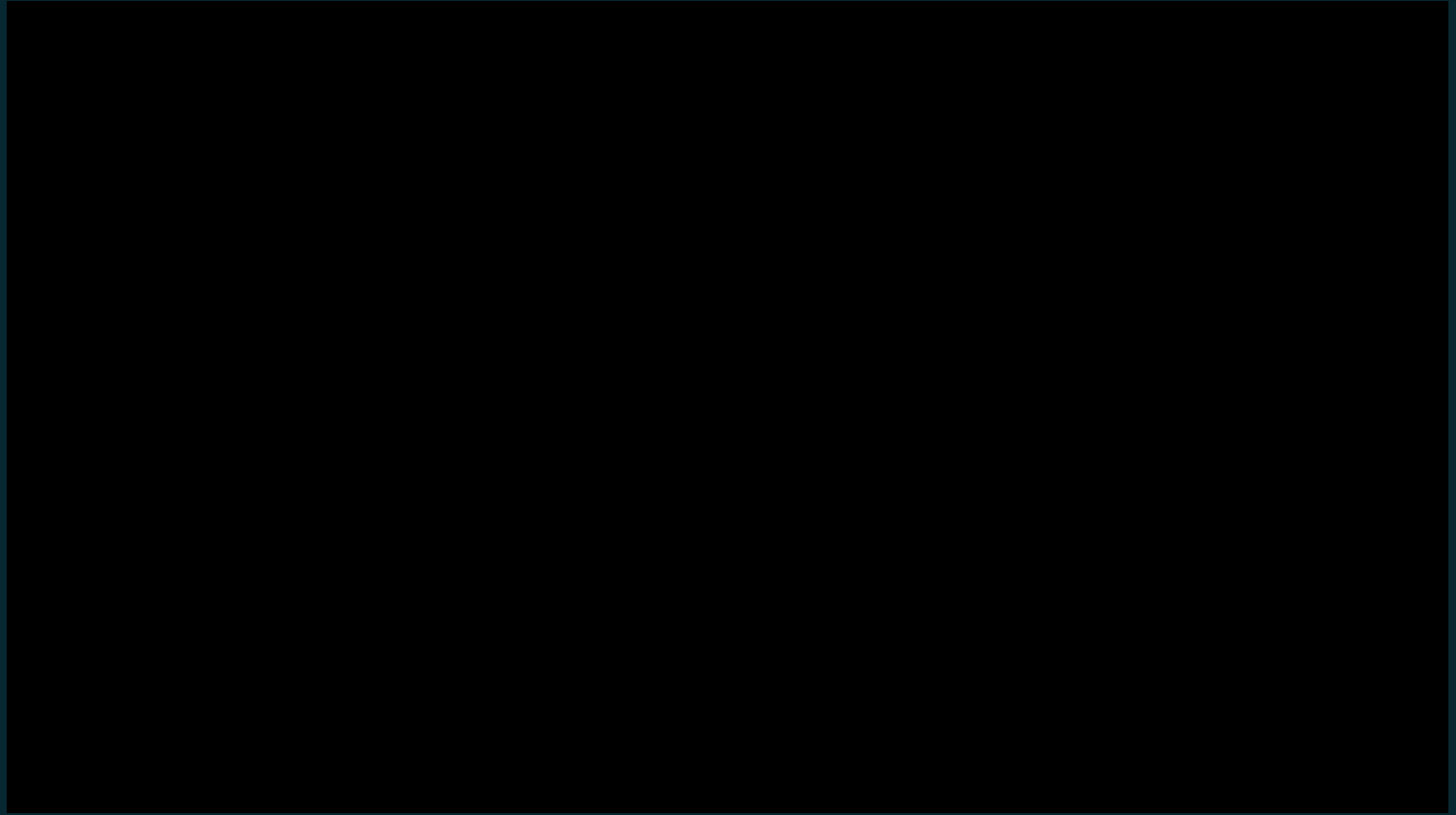*"those people just don't have the right values"*
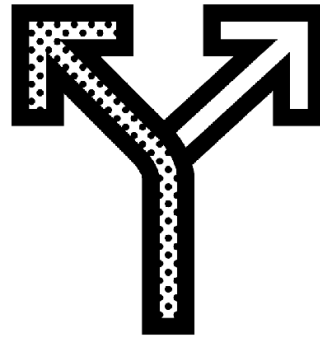
Separate Fates

"Different groups live in different worlds"

Fatalism

"Not much can change anyway - it is what it is"

Just saying "equity" isn't enough

Messages about 'health' often don't work as expected

– In a 2014 experiment testing different ways of framing environmental health, **emphasizing 'protection' or 'public health' had no effect.** (Framing the issue in terms of fairness across places worked better.)

– A 2017 experiment testing different ways of elevating the issue of oral health disparities found that **economic arguments had mixed effects**. (A **targeted universalism argument worked better**.)

– In 2018 and 2019 experiments testing different ways of framing tobacco-related health disparities, **emphasizing the negative health impacts had no effect** on public support for equity-focused tobacco policy. (Framing the issue in terms of **justice worked better.**

– In a 2020 experiment testing different ways of framing gun violence prevention in a heavily Republican midwest state, **messages about potential health benefits had no effec**t, while **messages about negative health impacts reduced support for policy.** (Framing the issue in terms of **democracy worked better.)**

Framing insights to keep in mind

–   Because the default setting for American thinking on health is 'individualism,' you can't assume that framing an issue in terms of health will work.

–   Because most people don't understand how systems and structures create and perpetuate disparities, you can't assume that pointing out racial disparities will work.

–   We can't assume that people understand what 'equity' means.

–   While these are the places that people start - it doesn't have to be where people land. (Framing can help!)

What's on your mind?

– Let's take a moment to see how we're making sense of this.

– Add a question, comment, or relate experience to the chat.

– We might not have time to address them all right now, but we'll try!

– Please take time to read others' comments. (And maybe take a moment to stand up and stretch!)
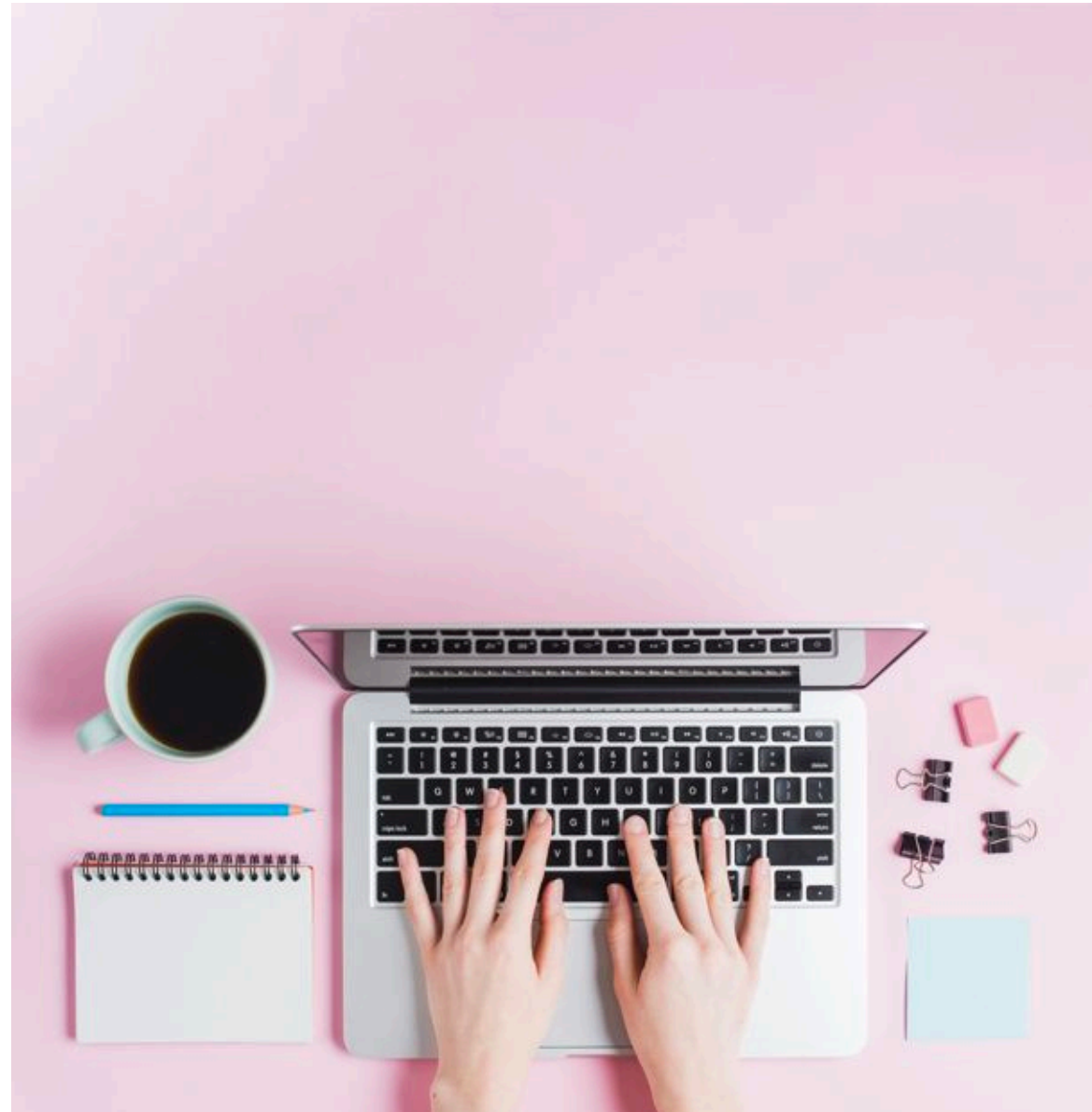
Shifting mindsets

Strategies for changing the conversation

Framing to avoid

– Does the communication leave room for people to assume the problem lies with the people experiencing it?

– Does the communication begin with numbers about racial disparities in health outcomes or "textbook definitions" of health equity?

– Does the communication focus attention on *who* experiences disparities, rather than *how* they come to be and how to end them?

– Does the communication take a tone that suggests that this interaction is an argument?

Framing to use

– Attribute responsibility to systemic, structural, or policy-level factors.

– Lead with justice/fairness

– Center explanation

– Position yourself as a reasonable partner in an important civic conversation.

Framing fix #1

Attribute responsibility carefully.

Tobacco use is less likely to become a serious problem when mental and behavioral health services are available for all family members and the wider community.
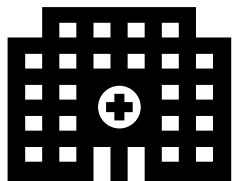
Pediatricians can steer youth away from smoking when they're trained to have conversations with adolescents about tobacco.

17-year-old Kaya is smoking menthol cigarettes.

When regulations restrict the sale of commercial tobacco near schools, youth see fewer tobacco ads.

School-based health courses can equip students with healthy coping skills and explain how harmful substance use can be.

Individual attribution

Every year, roughly 3,600 babies in the US die suddenly for unknown reasons. Researchers estimate that if expectant moms would just quit smoking, we could prevent 800 of those deaths.

Systems-level attribution

Researchers estimate that if we connected expecting families to treatment for nicotine dependency, we could prevent 800 infant deaths a year.

Missing attribution

In the U.S., too many women are suffering from pregnancy complications that lead to serious injury and death.

Systems-level attribution

The U.S. is failing to manage pregnancy complications that lead to serious injury and death.

Framing moves to keep in mind

– Make sure that statements about inequities include a concrete subject and an active verb.

– Attribute responsibility - not blame.

– Point to systems, structures, processes, practices, policies, and/or ideological factors.

Framing fix #2

Lead with the aspiration, not the problem.

*"Do you have a moment for a problem whose solution
has evaded humanity since the dawn of civilization?"*

Lead with one of these 'flavors of fairness'

"We need to ensure that everyone has access to what they need to support good health. This means recognizing and accommodating specific needs - because health is not one-size-fits-all."

"Everyone should have an equitable (fair and just) opportunity to be as healthy as possible, no matter where they live, work, or play. To achieve this, we need to address social problems, unfair practices, and unjust conditions that can weaken the health of specific groups of Americans."

"A just society ensures that no person - regardless of the color of their skin or who they love - is exposed again and again to things we know are harmful. To live up to the ideal of justice for all, we must tackle unhealthy conditions and barriers to good health that affect some communities more than others.

Framed with 'unequal outcomes'

"Tobacco is immensely destructive in Black communities, causing more deaths than AIDS, accidents, and homicide combined. Black communities experience the greatest burden of tobacco-related mortality of any racial or ethnic group in the United States - and tobacco-related diseases are the number one cause of death among African Americans. Lung cancer kills more African Americans than any other type of cancer, and smoking is responsible for 87% of lung cancer deaths."

Reframed with 'unequal obstacles'

"A just society ensures that no person—regardless of race or ethnicity—is exposed again and again to things that we know are harmful. Yet our policies let tobacco companies channel higher levels of advertising, discounts, and displays of their dangerous products into Black communities. These targeted, aggressive marketing practices contribute to more health problems. To live up to the ideal of fairness, we must change these practices."

Framing fix #3

Center explanation.
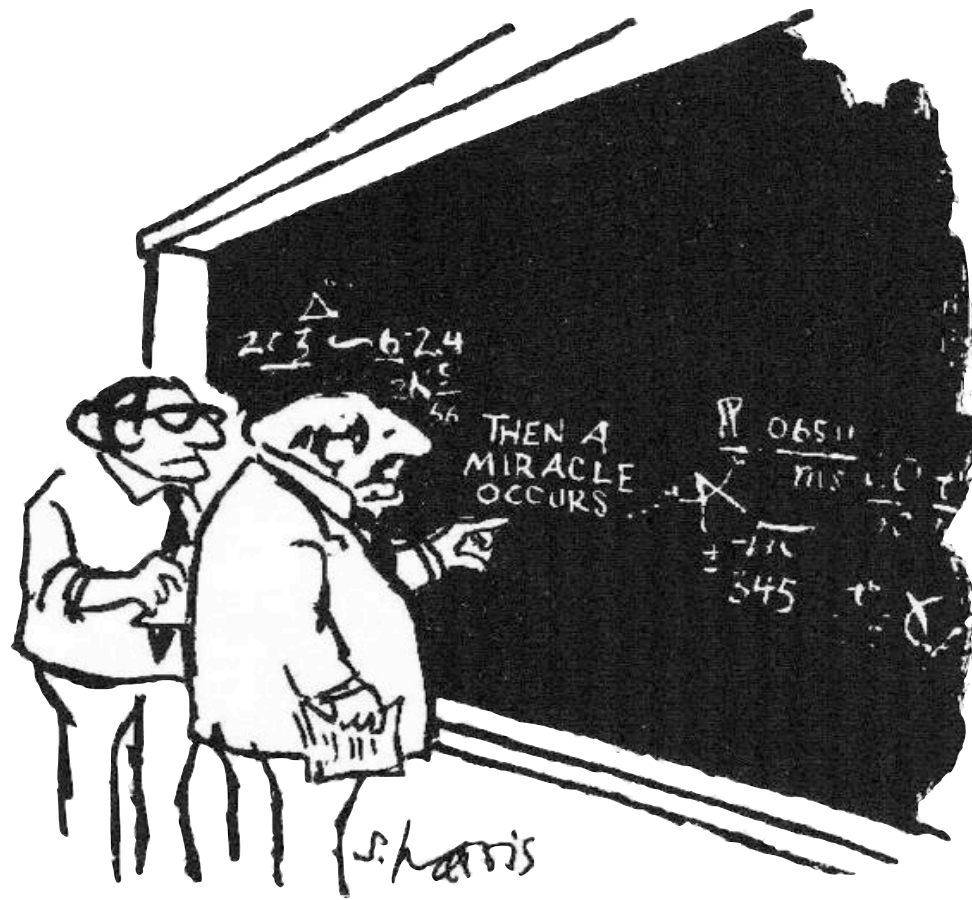
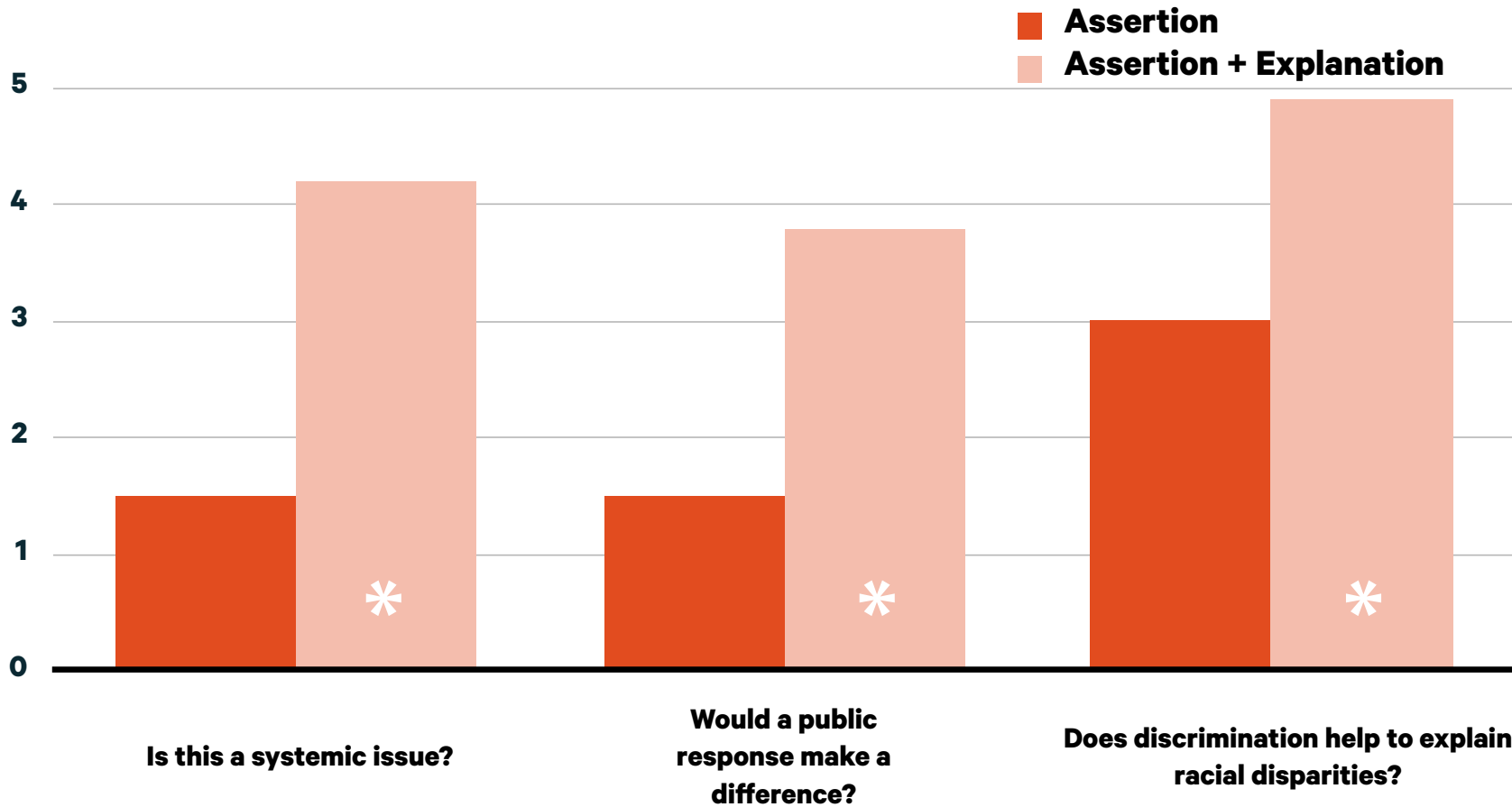"I think you should be more explicit here in step two."

Assertion

The negative effects of concentrated poverty are especially likely to affect Black Americans and Latinos, who are more likely to live in low-income neighborhoods. This is the result of legal and social discrimination against people of color, which stems from the legacy of history of enforced segregation and continues to affect residential patterns to this day.

Explanation

Banks are more likely to give subprime loans to Black and Latino applicants than to whites with the same financial history. Higher interest rates make it harder for owners to afford improvements, and increase the risk of foreclosure. This lowers nearby property values and makes it hard to sell. Racism in banking helps to explain why people of color are more likely than whites to live in distressed neighborhoods.

Explanation builds more policy support than assertion

Selected findings from a FrameWorks' survey experiment on framing concentrated poverty

■ Assertion
■ Assertion + Explanation

5	
4	
3	
2	
1	
0	

Is this a systemic issue?

Would a public response make a difference?

Does discrimination help to explain racial disparities?

* = P<.01

Explanatory chains show what affects what

- Strong explanatory chains:

    - Clearly lay out **cause-and-effect** sequences

    - Have a **tight logical flow** - one idea leads to the next

    - Include many **causal transition words**, guiding understanding of what affects what

    - **Can double the level of support** for good policy, when compared with mere description

**Framed with
"the numbers prove it's race"**

In the U.S., too many women are suffering from pregnancy complications that lead to serious injury and death. The U.S. currently ranks lower than all other developed countries when it comes to maternal death ratios. Some women are more at risk than others - and statistics suggest that race and racism play a role. Black women are 3 - 4 times more likely to die from pregnancy-related causes, even when risk factors like smoking, obesity, or participation in prenatal care are controlled for.

**Reframed with
"how disparities happen"**

The U.S. is failing to manage pregnancy complications that lead to serious injury and death. One reason is "implicit bias." Like all of us, health professionals absorb stereotypes that affect their decisions. The stereotype of the "strong Black woman" can lead doctors to minimize Black patients' concerns and miss opportunities to address problems before they pose a danger. Implicit bias helps to explain why Black women are 3-4 times more likely to die from pregnancy-related causes than women from other groups.

Misplaced or Missing Responsibility

→

Include a Causal Pathway

It Just Is
"Disparities exist among populations."

"Black women are less likely to receive prenatal treatment during pregnancy."

Missing actor / passive voice
"Youth are highly exposed to tobacco ads."

- Some Americans are protected from health harms - others aren't

- Economic and racial injustice increase stress, and trigger longer-term health problems for people of color

- Unjust and unfair practices have caused harm and continue today

- Implicit bias & biased practices built into systems shape experiences of some groups

- Industry saturates neighborhoods of color with marketing for harmful products

Explanations need not be lengthy lectures

Framing moves to keep in mind

- Never mention an *association* without an *explanation*

- Don't just name-drop the past. Show how history shows up today by giving contemporary examples of unfair or unjust practices.

- List less, explain more!

Framing fix #4

Position yourself as a reasonable partner in an important, inclusive conversation.

News media depends on an 'argument culture.' The rest of us shouldn't.

The risk of partisan signals

– Partisan language can:

  - activate "myside bias"

  - lead people to dismiss our communications as merely part of "politics as usual."

– To keep dialogue and learning open, take extra care to avoid word choices, themes, and examples that might be interpreted as coming from a particular political vantage point.

the frames we have

indignation

"they" don't care

too much political corruption

this major tragedy proves our point

we have to do something!

the reframes we need

explanation

most of us are deeply concerned

not enough political response

stronger laws would save lives every day

Here's exactly what we propose

We explored ways to encourage more (and more productive) talk about solutions to gun violence

Different tones elicited different responses

Political Inaction on Gun Violence Is Unacceptable! →

Viewed as 'accusatory' and politically charged

Rejected by participants as inappropriate for 'civil conversation'

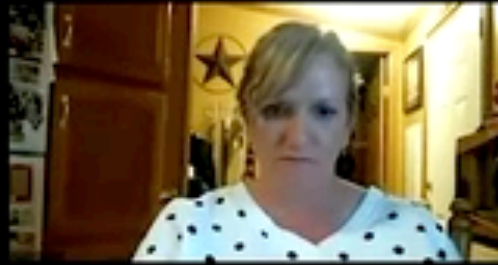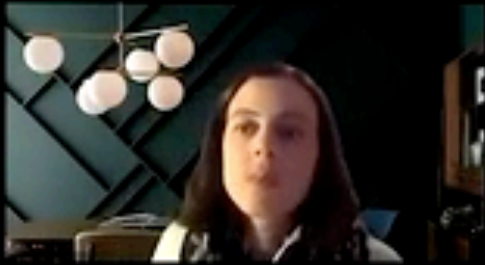**New Research Reveals the Impact of Gun Violence in Missouri** →

Viewed with suspicion: whose research?

Conversation focused on science and bias, not guns or solutions

We Can All Agree that Reducing Gun Violence Will Do Missouri Good →

Viewed as 'inclusive' and getting 'past political beliefs'

Participants envisioned a productive conversation following
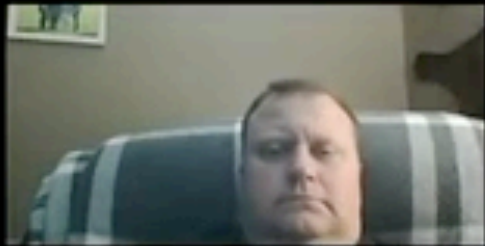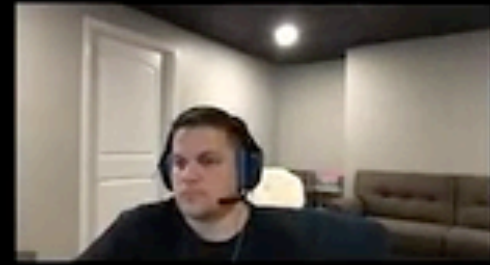
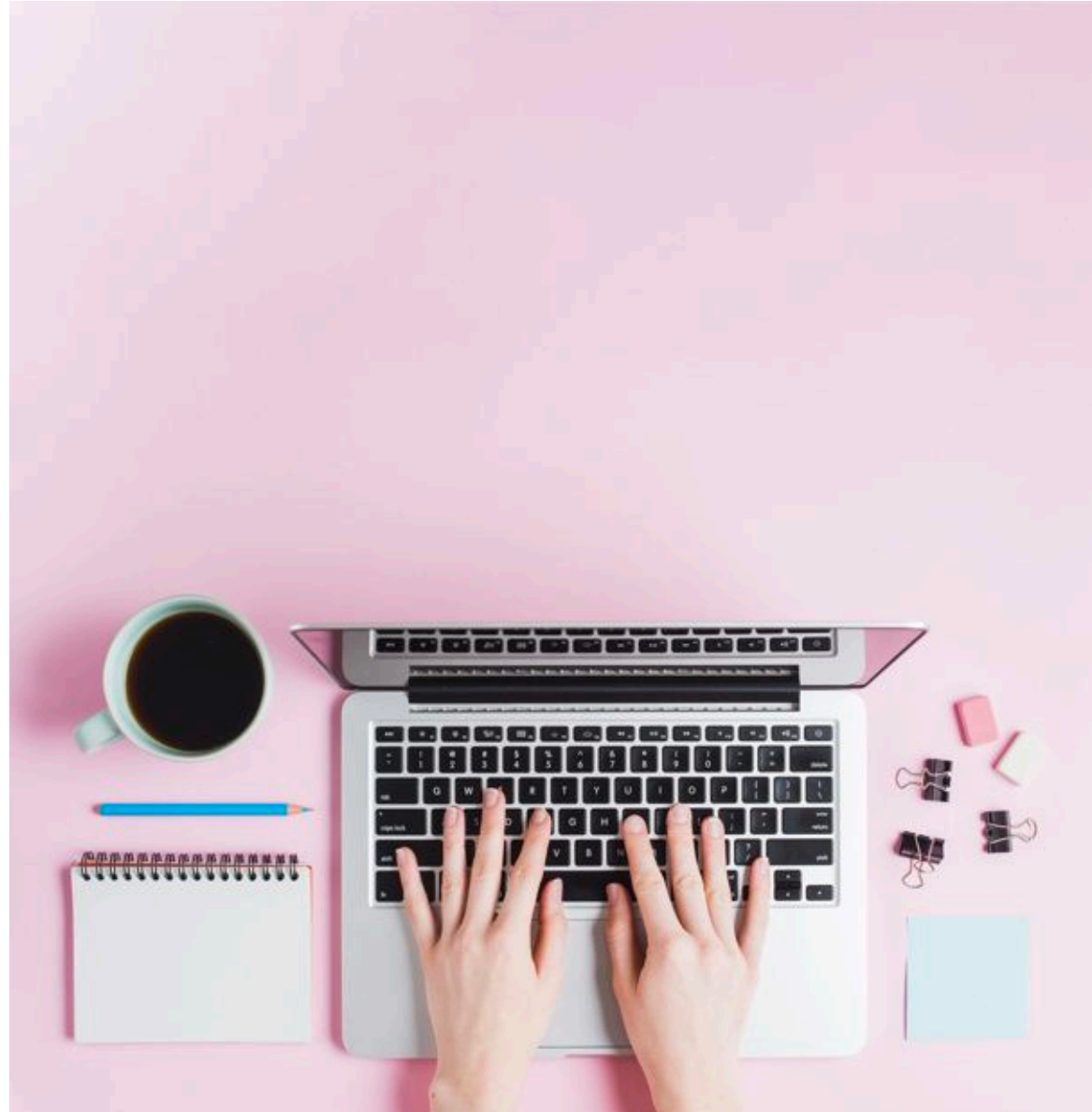After Reading a Message with *Reasonable Tone*

The world changes according to the way people see it, and if you can alter, even by a millimeter, the way people look at reality, then you can change the world.

James Baldwin, 1979 New York Times interview

What's on your mind?

– Please add a question or comment to the chat!

Thank you.

Let's continue the conversation.

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