



Framing Community Health as if Food and Fitness Mattered

A FrameWorks Message Memo

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Experts have argued that we need a new language of public health.ⁱ Too often the social and physical environments that shape health behaviors and outcomes are both out of sight and out of mind. This is compounded, some assert, by the way our culture discusses and explains health-related issues.ⁱⁱ Yet, policy experts tell us that issues from access to fresh food and public parks to the prevalence of violence and discrimination play a profound role in health outcomes. Many disparities between groups can be explained by documenting the quality of their communities or “the causes of the causes.”ⁱⁱⁱ Advocates and experts are left to wonder how they can make visible to the public the link between community and health so that community problems can be addressed at the systems level. This Message Memo attempts to use communications research to enumerate the grammar of a new narrative, one that has the power to direct public attention to the social determinants of health and away from the “easy to think” explanations of individual choice, personal responsibility and character.

Beginning in 2006, FrameWorks research was designed to study this problem in California, with funding from The California Endowment, and nationwide, with funding from the W. K. Kellogg Foundation. Both foundations were beginning to undertake strategic plans that addressed important aspects of community health. The California Endowment had initiated a program area that focused attention on the social and physical environments that shape health behaviors and outcomes. It foresaw a focus for foundation and grantee resources in years to come devoted to identifying, explaining, quantifying and addressing the broader issue of community health and the various factors that would cause it to improve or erode. The Foundation was especially interested in public thinking about prevention. The W. K. Kellogg Foundation was about to launch its Food and Fitness Initiative through which it hoped to “help create a community environment that supports healthy children, youth and families by making healthy foods available and increasing opportunities for families to engage in play and physical activity.”^{iv} The convergence of these interests led the Foundations to partner in a systematic investigation of the communications hurdles they faced in engaging the public in systems-level reforms to achieve these goals.

In this Message Memo, we report the findings from an integrated series of qualitative and quantitative research studies to suggest how community health advocates can do a better job of directing public attention to primary prevention and root causes of obesity, poor nutrition and unhealthy conditions. In addition to summarizing and synthesizing that body of work, this Memo extends this descriptive research by providing another level of more detailed and prescriptive interpretation to inform the work of policy advocates. Finally, this Memo makes concrete recommendations for incorporating these findings into a coherent communications strategy to engage Americans in building and supporting healthier communities. While it is driven by the specific interests of its two major funders, the FrameWorks research reported here can be used by policy experts, scientists and public health professionals, as well as by community health advocates with a broad range of interests to help explain why healthy communities matter and how the public can support them.

This Memo is not intended to take the place of the research reports that inform it; indeed, FrameWorks strongly recommends that aspiring communicators avail themselves of these reports and challenge their own creativity to applying this learning. Representative quotations are used here to remind the reader of the research base that informs these assertions; more nuance and variety can be found in the original reports.

I. About Framing

“We define first, and then see.” –Walter Lippmann

The last decade of research from the cognitive and social sciences has greatly expanded scholars’ appreciation for Lippmann’s original observation. It has, moreover, yielded new research practices and practical applications that are rapidly changing the way that sophisticated communicators engage the public.

The focus of this scholarship has been on: (1) **agenda setting**, or how media influence which issues people think are important for government to address, and (2) **framing**, or how people think about and interpret ideas and issues, particularly how they think about solutions to problems. Put simply, this is what research suggests about how people process information:

- People are not blank slates, but have stored their prior knowledge as a reservoir of existing frames or concepts
- People use mental shortcuts to make sense of the world; we are “cognitive misers”
- Incoming information provides cues that connect to the existing pictures in our heads
- People get most of their cognitive repertoire about public affairs from the news media which reinforces a framework of expectation, or dominant frame
- Over time, we develop habits of thought and expectation that configure incoming information to conform to this frame

People default to the existing “pictures in their heads.” But when communications uses different frames, people see an issue from a different perspective. This is known as “reframing” the issue.^v

This approach to communications alters significantly the way we approach research. Instead of asking **what** people think about a particular issue, framing theory would dictate that we ask instead **how** people are thinking about a particular issue in order to arrive at any given policy preference. To change the way people think, the answer is not to give people more information to process through their current frame, but rather to change the lens they use to reason about the problem. This approach dictates a different set of research questions from those used to drive more traditional research:

- How does the public think about community health and health disparities?
- To what extent do issues of access to healthy food and opportunities for physical activity figure in their assessment of the current state of community health?
- Are there dominant frames or ways of thinking that appear almost automatic?
- Are there default frames that are routinely relied upon to make sense of unfamiliar situations or policies?
- How do these frames affect policy preferences?
- How are these frames reinforced; what frames are available to people from media and the public debate?
- How can the problems affecting healthy communities be reframed to evoke a different way of thinking, one that makes appropriate policy choices salient and sensible?

II. The Research Base

To answer these questions, the following research was conducted:

A series of 40 cognitive interviews were conducted with ordinary people in three states and published as FrameWorks Research Reports. Those in four California communities, funded by The California Endowment, are published as “Health Individualism,” August 2006. Those in Colorado and Illinois, supported by the W. K. Kellogg Foundation, are published as “Fitness as a Personal Ideal,” November 2006.

Media content analyses were undertaken to identify the common frames used in the news to communicate issues related to food and physical activity. During six weeks in the summer of 2006, nine major media outlets were tracked, yielding 95 relevant stories that are analyzed for their frame characteristics in this report, “Calories Not Communities,” March 2007, funded by the W. K. Kellogg Foundation.

A second content analysis, conducted from the perspective of cognitive linguistics, was undertaken to speculate on the probable impact on public understanding of common tropes employed in the media, including both texts and images, advertising and reporting. “Implications of the Consumer Frame for Food and Fitness” was funded by the W. K. Kellogg Foundation, analyzing media portrayals of food and fitness issues throughout 2006.

A series of 24 focus groups were conducted in seven states, resulting in two FrameWorks Research Reports: “Civic Well Being: An Analysis of Qualitative Research Among California Residents,” September 2006 and “Discussing Public Environments in the Community: A Focus Group Report About Nutrition and Physical Activity,” April 2007. California groups were supported by The California Endowment and complemented by groups held nationwide and supported by the W. K. Kellogg Foundation.

A simplifying model was developed with funding from the W. K. Kellogg Foundation to address hurdles in thinking about food and fitness, based on experiments with 300 subjects, resulting in “A Systemic View of Food and Fitness,” March 2007.

A web-based survey experiment was administered to 4,500 adults in the U.S., with an oversample of 2031 Californians; the California sample included an oversample of African-Americans and Hispanics. The resulting report, “Framing Healthy Communities: Strategic Communications and the Social Determinants of Health,” was supported by both The California Endowment and the W. K. Kellogg Foundation and published as a FrameWorks Research Report in May 2008.

These reports are available on the Institute’s website at www.frameworksinstitute.org.

III. Situation Analysis

A. Default Frames

There are three highly available frames associated with community health that dominate public thinking:

- (1) health individualism, or the idea that health is primarily if not solely the result of individual choices;**
- 2) the acceptance of negative outcomes as inevitably produced by modern life; and**
- (3) confusion of health determinants with lifestyle choices, rendering nutrition and fitness the equivalent of hobbies.**

In this section, we explain each dominant frame and provide examples from the FrameWorks research to drive home the characteristics and consequences of each way of thinking.

1. Health Individualism: It’s All Up to Me

Arguably, the greatest challenge that assaults public health thinking is the persistence of individualist thinking, often to the exclusion of any other shaping forces. Health Individualism refers to the belief that each person creates his or her own destiny; it is therefore a personal responsibility to make healthy choices. The thinking is consumerist in nature, inferring that the consumption of better information and services is all that is required to improve the health of populations.

Seen in this individualist light, the consequences of these choices are equally limited, affecting only the individual and his or her loved ones. If there are differences in outcomes among individuals and groups, these are due to: lack of knowledge about what constitutes healthy living, lack of self-discipline, bad priorities and lack of willpower to make better lifestyle choices, and the influence of popular culture on what’s fashionable and acceptable. When external obstacles are acknowledged, they are viewed as obstacles to be overcome through character and effort.

Notice how FrameWorks informants respond to these open-ended questions about the causes of health disparities:

Q: “People who have better-paying jobs or higher-status jobs tend to be healthier. Why do you think that might be the case?”

A: “If you have a higher-paying job you are probably more educated, and if you’re more educated you pay attention to things like health, what am I putting into my body.”
 –Conservative white man, CA, age 32

Q: “Why are some communities healthier than others, do you think?”

A: “Why? I think it’s because of education, as well as upbringing and people taking pride in themselves. For example, I think some parents, they don’t seem to care about their children’s health. They just let them do whatever they want, as far as eating habits or their general grooming.”

Q: “Why do you think that is?”

A: “I guess some people – they are just not disciplined. They’re not disciplined with themselves or with their families.”
 –Liberal Asian-American woman, CA, age 39

This pattern of thinking clearly shuts out any notions of what FrameWorks has termed “linked fate,” or the idea that what happens in one community affects the society as a whole. Rather, their definition of health as personal choice further limits the responsibility of society to affect those choices. Such action would either be inappropriate or futile, say these informants:

“You can only regulate people so much, you know. You can always bring the horse to water but you can’t make him drink, too. So you can try and encourage people to live healthier lifestyles but it doesn’t necessarily mean it’s going to happen.”
 –Moderate white woman, CA, age 47

“It’s up to the individual, you know. It’s not society’s or government’s job to make sure you eat well or you try to take care of yourself.”
 –Conservative white man, CA, age 32

“I know a lot of people in today’s society like to point fingers and blame other people for their own problems, but I mean if you’re fat, that’s your problem. You need to exercise, you need to take charge.”
 –Conservative Hispanic woman, CA, age 29

Some argue that emerging issues like the so-called epidemic of obesity will eventually turn public thinking toward societal consequences. As the media coverage escalates and more people become aware of the magnitude of the problem, they suggest, people will see that the aggregate of individual health problems is so great that it must be considered systemically. There is little in the FrameWorks research to support this assumption.

More coverage of Health Individualism simply yielded more of the same assessment of individual responsibility. Consider these responses to queries about the prevalence of obesity:

“You know, I saw something recently about America's youth being obese and Americans being obese, but who pays attention? Nobody pays attention to it. They just keep right on eating.”

–African-American man, age 50, Chicago

“I think [obesity] should be treated like a disease. I think that it affects your entire body, it also affects your mind. It's a very holistic issue, you know, in terms of your body, and disease is similar as well, in terms of that it usually affects your whole body in some capacity or another. And I also think it should be treated like a disease because you can die from it, and I think that might be the only way to get Americans to actually pay any attention to it.”

–White woman, age 36, Fort Collins

And, while some might argue that there is truth in the assessment that individual choice plays a role in health, and that individual health plays a role in healthy communities, it is the exclusion of all conditioning factors that characterizes this pattern of thinking and renders it problematic. In the words of Sally Macintyre and Anne Ellaway, summing up a volume of scholarly work from the perspective of social epidemiology,^{vi} “People create places, and places create people.” They go on to explain what they call “the atomistic fallacy”: “In much research on socioeconomic inequalities in health, the unit of analysis is the individual or household. Individuals or households are ascribed socioeconomic characteristics based on indicators such as occupation, housing tenure, education, income and car access...and these indicators are then examined in relation to health. These measures are usually treated as though they were properties of the individuals or households. However, these indicators can be conceived of as determined as much by the place as by the person or family.”^{vii}

These scholars argue for a place-based orientation toward social problems. “It is not for nothing that realtors say that the three most important things about a property are ‘location, location, location.’” More seriously, they report “a deprivation amplification effect, or inverse care law, that tends to apply, across the whole range of potential environmental influences on health, to neighborhoods in which more socially advantaged people are concentrated. In places where there are high rates of obesity and poorer dietary habits, there are fewer facilities for healthy physical recreation and for the purchase of healthy foods.”

Indeed, when we ask what is missing from the perspective of Health Individualism, we find many important aspects of expert social analysis to be entirely invisible, including:

- Social factors that influence health (isolation, depression, racism, violence)
- Physical factors that influence health (housing, pollution, early deprivation)

- Political factors that influence health (redlining, access to insurance, lack of transportation)
- Economic factors that influence health (joblessness, poverty, lack of healthy food)

These important aspects of the problem are literally crowded out, or forced out of the frame, by the Health Individualism cultural model.

2. Modernism: Progress is Inevitable

FrameWorks' research on a number of issues – from rural economic development to food system reforms – points to the influence of a belief that modern life is something inevitable, with both benefits and consequences but, like a force of nature, cannot be resisted. Standing in opposition to the course of modern progress, then, is seen as a futile and “backward” position. Even when the effects of progress are acknowledged as regrettable, with negative consequences for civic and family life, efforts to oppose them are seen literally as efforts to “turn back the clock.” Saving the family farm, when viewed through this lens, was a romantic and impractical effort – not an important foundation for rural economies.^{viii} Encouraging local farmers' markets was seen as nostalgic and quaint, but not a necessary and innovative policy that could improve population health.^{ix} Similarly, in this body of research, the reality of modern life tempered the concern that people may be less healthy today and that their diets and made environments may be contributing to that reality. Modern life is, by definition, less healthy, people said. Everyone has stress. But the best one can do, they assert, is to “get over it.” Taking a note from science fiction, it is as if every backward culture faced with the new must eventually recognize that “resistance is futile.”

“It just wouldn't be cool for me to ask a girl out to the movies and then say hey let's walk there -- that just isn't going to happen. That isn't cool.”

– Male Teenager, Albuquerque, NM

There were two interesting corollaries to this theme. As FrameWorks had observed in other research,^x ^{xi} there is little to be gained by confronting people with facts about the deterioration of communities. They assume this to be the case – civic life is an expected casualty of modern life. As in previous research, FrameWorks observed the immediate explanation of this decline in community as a breakdown in moral values. Note the confirmation of Health Individualism here: if health is an individual choice, a product of effort and character, then lack of health in communities is a breakdown of aggregate will and discipline. This conclusion is beautifully expressed by one informant:

“I would think [a healthy community is] one that works together to keep the environment clean. It goes back to the water, the soil, – just working together. We don't have communities like we used to have where people all got together and for a common goal -- We've all gotten so busy. Technology supposedly makes our life easier, [but] it also speeds everything up because the faster technology can do something, the more you want to cram into your day. Two-parent working households I think have contributed to

that. Both parents are out of the home, television, video games have kept kids inside instead of outside where they need to be.”

–CA, liberal white woman, age 40

And echoed by others:

“Now kids aren’t safe to be out. When we were kids, there was a community. If I was in the neighbor’s yard the neighbor would pick me up and take me home. Times have changed. You don’t have that anymore. How do we get that community back?”

– Female Democrat, Des Moines

“I would be fine with allowing my kids to walk to school in some areas, but in others, it just isn’t safe any more. There use to be a better sense of community, people use to look out for one another kids. We are no longer community oriented.”

– Female Republican, Des Moines

Second, modern life served as an excuse for poor habits. “We’re too busy to be fit,” people explained. Individual and community health are the price we all pay for the conveniences, stresses, and opportunities of a modern lifestyle.

Q: “Why is it that we’re not, as a society or as individuals, doing all that we need to do to stay fit and healthy?”

A: “You know, this is going to sound a little bit facetious, but drive-thrus. I mean, People Magazine is a perfect example. People Magazine is for people who don’t want to read, who have an attention span of 60 seconds or shorter, who don’t really want information, who just want captions. Well, our lifestyle has become the same way. We want captions, we want quick food. We want easy things”.

–White man, age 50, Fort Collins

“The world is moving so fast, and people don’t have the time. It is like you are always trying to keep up with the Jones. You want to one up your neighbor. The lifestyle you project is so important nowadays.”

– Male Republican, Des Moines, IA

Finally, because this explanation is seen as relatively nonideological, it can be found in diverse communities. Note the array of backgrounds in these explanations of how modern life drives the fate of communities:

“I think maybe [fifty years ago] they didn’t have as much medical knowledge so maybe in that way [they were less healthy], because things killed them that wouldn’t normally. But as far as eating healthier and exercising, people weren’t out drinking and smoking and drinking shots all night, they were eating well off the farm and going to bed early.”

–Liberal African-American woman, CA, age 56

“It’s just the world we live in nowadays. Everything that’s going on around us.”
 –Conservative white woman, CA, age 65

“A lot of people are really driven, they’ve got mortgages and they’ve got car payments and they’re all driving around in really fancy brand new cars so they put the pressure on themselves in a lot of ways too. But, I think that stress really plays a big role in people living shorter lives.”

Q: “Do you think there is anything we could do if we wanted to change that?”

A: “Well, it’s kind of on a personal basis.”
 –Liberal white man, CA, age 53

“Some people seem to thrive on stress . . . and only seem to function at their best when they’re under stress . . . It would be great if we could do away with it altogether, but it’s never going to happen because people . . . bring a lot of it on themselves.”
 –Moderate white woman, CA, age 47

The consequences of this particular frame are especially pernicious because of the tendency to view any ameliorative policy through the lens of progress. Put another way, any attempt to correct or update the status quo inevitably entails a streamlining, an industrial modernism that is connected in people’s minds with fast, efficient, and inevitably less healthy. The essential equation of modernization, that something is lost in embracing the new, undermines any automatic association of healthy foods and a different built environment with the march of progress. Looking forward, highways are expanded and foods get packaged in longer-lasting containers. Looking backward, we are nostalgic about children walking to school with home-made lunches.

3. Lifestyle: I Feel Pretty

Another common frame that undermines the seriousness of community health is the idea of Lifestyle. If the availability and choice of food and physical activity are seen as aspects of lifestyle, they become quaint and somewhat inconsequential characteristics of the way we live, not determinants of health. In this view, fitness is a hobby or a goal, not the opposite of inactivity. Some people want to appear in one way, others don’t care. And if there is a role for community, it is as role models to individuals.

Q: “What would be the advantage for you in having everyone in your community or everyone in the country be as healthy as possible? Would there be any advantages to you personally?”

A: “Well, that means that I would be one of them, so personally I would be healthier.”

Q: “What about other than that?”

A: “I think overall there would be a lot of advantages because when you’re healthier you feel better, you act better, you’re kinder, so I think people would just be nicer – and it would also not drain resources.”
 – Liberal white woman, CA, age 40

“If I see someone that’s healthy, I see the benefits; it drives me to want to follow their lead.”

–Liberal African-American man, CA, age 42

“If you have a healthy community, within that community the people would probably be more likely to be more community-oriented with each other. Because they feel good, and if you feel good, you’re happy. If you’re happy you want to be involved with other people. When you feel lousy, you just kind of want to be by yourself a lot of the time, you know.”

–Conservative Hispanic woman, CA, age 29

Q: “Does it make sense to think of obesity as a sickness in itself? In terms of stressing your body or making it harder to walk. . . ?”

A: “No. No, I think obesity is a state of mind. People can be obese and be happy with themselves and not care if a person says, “Oh, you’re fat.”

–Asian man, age 52, Chicago

“Well, you’ve got to get back to culture. Certain ethnicities have a tendency to eat more fatty foods. It’s just cultural. It’s the way they grew up.”

–Liberal white man, CA, age 53

Some overdo it, our informants say, and this is seen as an indication of narcissism. But whether effort is underwhelming or overwhelming, the point is that it’s all a matter of individual preference. And, as explained above, the consequences of excess or laziness stay with the individual.

Q: “These days in our society, do you see too much emphasis on fitness, or not enough, or maybe an OK amount?”

A: “In some perspectives, I think that there’s too much and, in some perspectives, I think there’s not enough. Because I think there’s like “over-exercisers,” that they’re obsessed with it, and I think that, unfortunately, the media and marketing have put a body image issue especially on women. In college, I knew women who would work out two or three times a day, which is a little excessive. So, in that perspective, I think the media puts pressures on women, that they need to be skinny and perfectly built.”

–White woman, age 29, Fort Collins

Closely related to this assessment is the conclusion that people who choose to be “fussy” about their foods are people with the means and time to do so. Preference is a luxury. Most people don’t have time to cook, shop for organics, or exercise. These then are seen as attributes of an elite lifestyle. Real men eat fast food.

B. The Search for Better Frames

Are there better frames available in public thinking on which to build a greater appreciation for systems-thinking? The FrameWorks research method takes early qualitative results from open-ended interviews into focus group settings to verify their dominance, to explore their nuances and to experiment with other ways to

prime better policy-oriented conversations. FrameWorks researchers compose a series of news articles organized around specific frames and use these as the basis for priming a focus group conversation.^{xiii} From this phase of the research, three important frames emerged that appeared to get past some of the problems identified in the earlier research. They are:

- (1) **empowered communities promote quality of life**, or the idea that collective action can be galvanized to make changes in the systems and policies that constrain community improvement;
- 2) **government affects health outcomes**, in both positive and negative ways, and should be working on the side of the people; and
- (3) **protecting kids** from negative health influences and outcomes should be an explicit responsibility of public institutions.

In this section, we explain each of these potential reframes and provide examples from the FrameWorks research to explain how these reframes redirected thinking.

1. Empowered Communities Promote Quality of Life

When informants were prompted by news articles to consider communities that had taken collective action to restore and promote a better quality of life for their citizens, they shifted significantly from a “consumer stance” to a “citizen stance.” In other words, they overcame the narrow frame of Health Individualism in favor of a sense of collective empowerment. That transition was not always achieved, however, and the lessons across the focus groups are instructive in enumerating frame elements that both enhance and detract from systems-thinking.

In the earlier focus groups, held across California, an article that showcased communities that were making a difference met with significant interest, made people hopeful and motivated many to question why they did not hear more about such efforts.

“I think it's like we're making better communities through these actions, and that's getting communities to work with their local government. . . Sometimes we blame a lot of things on government.”

– Oakland, CA man

“It sounds as though these three mayors were really interested in their communities.”

–Bakersfield, CA man.

“It looks like the government and the citizens were working together.”

– Oakland, CA woman.

“I found it very interesting how we, the people, have the power to change our environment. It's saying look, you can go to Wal-Mart or you can create 10 little locations so that people made the change in their community.”

– Irvine, CA Hispanic woman.

“I feel like neighborhoods and groups of people can make things happen. It can be tedious but we can go to the government. We are the government. Perhaps it's not the one that we wanted most. The people make it happen ultimately. That's where it starts. People organize, they join together and they are tremendously powerful and it is great to see that things can change.”

–Oakland, CA woman.

“You get a person that has a chronic illness living in the slums, has no healthy environment around him. Pull him out in a helicopter and stick him somewhere in a nice area with everything he needs around him: recreation areas, to elderly, helping the elderly, he is going to get well. He's going to be a lot better within months.”

–Bakersfield, CA man.

However, as this article played out across the country, regional differences often provided the fuel for skepticism. Skepticism that “it can’t happen here” often trumped the value of innovation that was put forward by the articles.

“It would be 10 times tougher to have St. Louis on this list, or Oakland, or L.A. . . . you definitely have a tougher time when you are weighted to a city budget. Like if a borough in Brooklyn wanted to do it, they've got to wait for Bloomberg to do the whole number. If east Oakland wants to do it, we've got to wait for Jerry Brown to do the whole number . . . these are great examples, but when you can wrap your hand around a community and have that kind of planning where everybody is involved, you can see the results sooner than when you are burdened by a pressing set of problems that a bigger city has.”

–Oakland, CA African American man

“I would like to know how many people actually participated in each of these 3 programs. I mean did it really work?”

– Albuquerque, NM Republican man

“I would like to see leadership and costs. Where is the money coming from? Who would be sponsoring the movement?”

–Des Moines, IA Democratic woman

“That won't work here in Boston.”

–Framingham, MA Republican man

“This is like the urban villages once attempted in Seattle. It was a great idea, but it failed.”

– Seattle, WA Democratic man

A key ingredient in the framing of community action is the fact that the communities themselves are the agents of change. This is partially a bow to the notion of personal responsibility. But it is also predicated on the belief that local people will make the best decisions for their community and will be more vested in seeing that changes persists.

“I like the idea that . . . it said parents are running recreation activities in the park. What happened is we are now giving ownership and responsibility back to parents and back to local people. We gave you the means to do it. Now here is your opportunity.”

– Irvine, CA man

“What stood out to me was the fact it says here they worked with the citizens to put together a master plan in building the parks. So it was a community effort. You got to involve the people in the community.”

– African American man, Oakland, CA

It is important to note that, even when discussing actions that were taken in light of municipal policies, focus group participants struggled to recognize a connection.

“Community action, not government,” explained a female Democrat from Framingham.

Ironically, when this frame strays too far toward the assertion that places create people, many informants returned to explanations of individual choice. This was especially notable in discussions about parks. “Even those who support parks as a solution emphasize physical activity as the goal and personal responsibility as a prerequisite,” concludes the FrameWorks Research Report following focus groups in California.^{xiii} :

“There are bike trails and parks in every corner. My husband and I find ourselves going to the parks more than we ever had before. This is totally true. We go out of our way to walk because it's there. It's available. In Orange, we didn't really have anything nearby...I feel a lot more active now than I did before.”

– Hispanic woman, Irvine, CA

That FrameWorks Research Report cautioned that, “To serve as an effective policy example that supports the frame, parks need to be characterized as much more than simply a physical location for exercise. The unique benefit of parks that supersedes the conflicts about whether or not they are needed for exercise, whether or not people will use them and whether or not they already exist but are unsafe, is the notion that parks are central to wellbeing due to a number of physical, mental and environmental health benefits.”^{xiv} Without the connection to a broader network of public structures – conditions of roads, schools, police and fire departments, etc. – the discussion about parks devolved to a choice of exercise venues and rejoins the Health Individualism frame. But if it is connected to a broader array of structures that support health, the discussion turns in the right direction:

“A park is a place for exercise and something pretty to look at, but it's also letting you know, if you go beyond that, it makes your children healthier – less asthma, less stress, people can heal faster. So it isn't just a place to go to take your kids to play. It's a way to keep the community vibrant and healthy.”

– African American woman, Oakland, CA

Indeed, the same pattern was found in the focus groups conducted nationally. When people felt too much responsibility had been put on the “public environment,” they explained away the systemic in favor of individual responsibility. Perhaps most interesting is their quick application of this thinking to children, by holding parents accountable. This is in direct contrast to the systemic thinking people applied to children when primed with an article about schools (see below).

“Parks are overrated. You can go outside and walk anywhere in the world.”

– Male Republican, Des Moines, IA

“As far as children go, it is up to the parents. If the parents take them out and play baseball with them, they will begin to be more active.”

– Female Democrat, Albuquerque, NM

It appears that the issue of whether people will be more inclined to lay responsibility for children’s health at the feet of families or communities is greatly influenced by the way the issue is framed. While the strong default position is toward families, when government’s role is already established (as in the setting of schools), some of this narrowness can be overcome. As we will see below, Schools play a role similar to the U. S. Farm Bill^v in overcoming opposition to government – because government is already an actor.

2. Government as Goad vs. Government as a Given

By introducing government’s role in promoting the availability of healthy food and spaces for physical activity, we often observed an instantaneous backlash against government interference with private choices. The Nanny Government that scolds, the Big Government that socializes, and the Ineffective Government that mucks up markets are all easily evoked by any frame that inadvertently pits Health Individualism against external control.

On the positive side, people will readily admit that some communities are advantaged or disadvantaged by their relative access to health-promoting environments. They also believe that government (whether local, state or federal) should support community choices, not undermine them. In the second set of focus groups, conducted nationwide, FrameWorks used the Farm Bill as a way to overcome this government backlash since government was already involved. The test article to which informants were exposed argued that, because governmental policies favor certain crops, this may lead to a food production system that ultimately dictates what food is available to us, what we most want to eat, and how healthy or unhealthy we are. While informants were generally unclear about what the Farm Bill represents, they were curious about the Bill and believed it to be highly relevant to what crops are grown and why. In effect, the Farm Bill reoriented the discussion to what values should inform government policies, rather than whether or not there was a role for government in food policy.

“It amazes me how much Congress determines what is for dinner. We are the people that are paying their paychecks . . . We have let Congress decide how to raise our

children and what to eat for dinner; it is up to us, not up to Congress. The sweet stuff is why children are obese.”

–Democratic Woman, Des Moines

“Most of the sugar comes from sugar beets, which are grown mostly in the Midwest and the South. That’s why the Farm Bill is very powerful and dominates the politics of a lot of states.”

–Male Democrat, Seattle

“Unless you are a huge farmer, the subsidies aren’t that huge. Americans have cheap food because we are subsidized and we don’t see that part of our taxes are sent to pay for cheap food.”

– Female Democrat, Des Moines

“It doesn’t [Farm Bill] just impact farmers and agricultures. It impacts everyone.”

–Male Democrat, Seattle

However, government should never make up for individual choices and behaviors, they quickly assert.

“I don’t want the government to stop me from supersizing my fries.”

–Male Republican, Des Moines

These responses shed further light on trends that surfaced in the open-ended interviews as well.

Q: “What can a city do to improve the overall health and fitness of people who live there?”

A: “It’s interesting in Chicago, the parks and rec department down at Millennium Park, they have yoga and pilates and different exercise classes in the park every weekend.”

– White woman, age 53, Chicago

“The government’s role? Encouraging people to eat better, I suppose, to be fit, but they’re already doing that. I mean it’s up to an individual what they want to do. I don’t think they can force people to do something.”

–White woman, age 62, Fort Collins

Q: “We have become a flabby nation, [shouldn’t we] be concerned about that?”

A: “I don’t think we should be concerned about it. If a person’s going to stuff his gut and die early, then let him do it. That’s their problem . . . Is the government going to come in and start dictating to people how they can be happy and how they can improve their quality [of life]?”

–White man, age 68, Fort Collins

If there is a role to be played by any actors beyond the individual, the most logical one is for business to react to the will of the people who vote with their pocketbooks. Admitting that price affects choice, people say that businesses should/could lower prices and leave consumers free to choose. If people wanted healthier foods, they would pay to get them. Caught in this cycle of business supply and consumer demand, there appears little role for a regulator. This is equally as true of issues like the provision of sidewalks by developers as it is of access to fresh produce. Responding to the same article that explained the Farm Bill, some respondents resorted to price and choice as explanations of preferences, which were hardly seen as pre-determined. And, once marketing/advertising became the perceived driver of eating habits, the connection between government and what the food industry does was largely lost.

“I think the information is there but this is a consumer-driven country. I think the consumers need to be educated more. As we get more education, people will start making better choices instead of just looking at the costs.”

– Female Republican, Albuquerque

“My girl at home loves fruit. She goes to the supermarket, and she wants peaches. One peach is \$2.59. My sister is on a low income budget, \$2.59, wow! She will buy it, but she will only be able to buy that one peach...People have the right idea: this is what is healthy for you, but sometimes it’s much easier to stuff yourself at McDonalds versus going to the supermarket . . . Going through a McDonald’s drive-thru is also much more fun for a child.”

–Female Democrat, Framingham

“Whatever is going to sell is what the government is going to put out there. If McDonald’s is gonna sell, they are going to bring it out to fifty cents, and yes, people are going to go out there and buy two for a dollar.”

–Female Republican, Framingham

“Who is going to buy an expensive salad when you get a double cheeseburger for a dollar?”

–Male Teenager, Albuquerque

“This is a very poor state, and as parents, your budget doesn’t always allow you to buy the good stuff when you can buy the 2-for-1 bread, or the canned foods that is much cheaper.”

–Female Democrat, Albuquerque

It is precisely this delicate balance, between overplaying the role for government, on the one hand, and getting people to see the causal link between what’s in their community and government policies, on the other, that provides the framing opportunity for the Farm Bill. Responding to an article that explained that, because government policies favor certain crops, this may lead to a food production system that ultimately dictates what

food is available to us, what we most want to eat, and how healthy or unhealthy we are, many focus group respondents accepted government's role as a given and then tried to work to improve its impact.

"It amazes me how much Congress determines what is for dinner. We are the people that are paying their paychecks . . . We have let Congress decide how to raise our children and what to eat for dinner; it is up to us, not up to Congress. The sweet stuff is why children are obese."

– Des Moines, IA Democratic woman

"The politicians from the big farm states, they have fought and kept these subsidies in place for years. They have refused to look at the health impact on America. The politicians involved in all of this are also pretty dirty."

– Raleigh, NC Republican man

"It doesn't [Farm Bill] just impact farmers and agricultures. It impacts everyone."

– Seattle, WA Democratic man

"They took away a lot of the good stuff out of the schools. The government has cut back so much money that the schools can't afford to bring in any of the decent foods any more. Plus they are putting things that kids like, but if you just put things that kids like, you know . . . When I was going to school, we had a menu, if you didn't want to eat, too bad, you didn't eat."

– Framingham, MA Republican man

3. *Protecting Kids*

Some of the same advantage in taking the argument to schools accrues from the fact that these public institutions are perceived as already affected by government policies. When people are reminded of the role that schools play in promoting child health as well as learning, they are also reminded that government plays a role in these outcomes.

"They are saying that the school system needs to design programs to put that back in. But that again is back to politicians, because the school boards are the ones to decide what you should do and how the classes are run. To me he is saying that, and also get a big movement going, a community movement."

–Female Republican, Raleigh

But the discussion can still easily revert to issues of choice and discipline.

"They took away a lot of the good stuff out of the schools. The government has cut back so much money that the schools can't afford to bring in any of the decent foods any more. Plus they are putting things that kids like, but if you just put things that kids like, you know . . . When I was going to school, we had a menu, if you didn't want to eat, too bad, you didn't eat."

–Male Republican, Framingham

Without more directive framing, even articles about the health and the future well-being of children fall prey to the predictable patterns driven by Health Individualism: habits start early, parents are to blame, and kids need to develop discipline. Interestingly, in the cognitive interviews, advertising was not volunteered by informants as a contributor to children's habits. When advertising was provided as part of the focus group discussion guide, however, a somewhat different conversation ensued. Kids and parents were often seen as exploited by unfair or selfish business practices.^{xvi} This did not emerge as a major finding in the research, but is often suggested by advocates. We would caution that, here as elsewhere, the shift from a focus on government to business may result in a lessening, not a strengthening, of government responsibility.^{xvii}

Public response to framing children's issues was most beneficial when the articles were able to remind people that government should support public health and when schools were named as the locus of problem and solution. In the first instance, people were able to take a "big picture" view when they are exposed to a frame that suggests there are systemic factors which lead children to get less physical activity, and that this in turn has a direct effect on how healthy or unhealthy children are. FrameWorks researchers suggested that the reason this frame works better for children than for adults is that participants are, in effect, saying "don't tell me what to do, but get the children in better shape."^{xviii} It must be admitted, however, that the frame to which informants are reacting below was first primed by stating that children are the stakeholders of the future.

"I like how they are making the streets walkable and bikeable. Because, now we can't even get two cars on a street, God forbid if a child wants to bike in the street, because they only put a sidewalk on one side of the street. When I was growing up the street was wide enough. Now they build on top of each other. You hear people talk about it in the communities and with their neighbors, but nobody does anything about it. I think they don't want to fight with getting a petition together; going down to city council, fighting and pushing issues that they know themselves need to be done . . .

I think this is a big problem...with children; now you have a problem where they are going to go to schools. The schools are too crowded. If you leave green space, make the communities where children can walk to school, it will be more community involved; you won't have to bus certain kids because this community is overdeveloped and there is too many kids going here, and now we have to have year around schools, and get the developers involved and dedicate some of this land to build schools, so that this won't be such a problem . . . "

–Raleigh, NC Republican woman

"I would say that one of the things that was refreshing with both articles is that they tied together a lot of pieces that often they talked about in isolation. Urban planning never gets tied with PE, they are isolated issues, and both these articles tied them both together very well; and really pointing out the root causes, the way the medical cost, education and urban planning are tied together."

–Seattle, WA Democratic woman

The frame used in discussions for the national focus groups directed people's attention to a variety of institutions. The recommendation coming out of those groups was to narrow the focus on schools. The reasoning was two-fold. First, people found it easy to believe and accept that fact that schools had made mistakes, such as limiting physical education, but that these mistakes were also reversible. They were able to see that viable solutions exist within public institutions that can directly affect the fitness and health of children. In effect, their sense of agency was enhanced. Second, as mentioned above, when schools were made the focus, it became clear that governments and public policies were at least partially responsible for outcomes.

"We did do a good job in getting the soda and candy out of the schools. So far we are on the right track."

–Male Democrat, Albuquerque

"The first issue is with our children, and physical education is not a big thing nowadays. I think that what we have forgotten is balance. We forget about their physical wellbeing. We have eliminated physical education, and kind of put it under the rug, but if we keep putting things under the rug, we will have a mountain after a while. And that is what we have now, and we are trying to figure out what's going on. We need to bring balance back into our school system. That it's not all just education, but education is part of being healthy and having nutrition."

–Seattle, WA Democratic woman

"They are taking away the structure. Maybe that is why they [children] are obese!"

–Male Democrat, Framingham

"I had no idea they didn't have physical education. I don't have any kids, and I had no idea. They are trying to focus so much on the testing because the scores are so low for the state, and I don't know how to correct that but something needs to be done."

–Male Republican, Raleigh

C. A Caution About Safety

One problem that attends to the issue of community health, and attaches to considerations about those spaces where healthy food and physical activity can be accessed, is the issue of Safety. Even when informants agreed that changes were desirable and achievable, they remained skeptical that community facilities could be made safe or that people would believe they were safe. FrameWorks research has shown on numerous issues how concern for safety undermines collective action.^{xix} Put simply, if community is the place where you are endangered, or the group that threatens you, it is hard to see more community institutions as a solution. At its most extreme, this linkage looks like this:

“The community turns around and blames everybody else for the problem and they don't address the problem themselves. That's just like right now with all the gang violence. It's ridiculous. I've got a solution... You take all the gang members, all the druggies and you put them out there in the Mojave Desert and you put a fenced off area. You put them in the middle of it and you give them their guns and you give them their dope and you say this is yours. Have fun. If they kill themselves, so what?”

–Bakersfield man

But even in a more benevolent vein, the Safety Frame serves the purpose of moving toward small picture, individual protections – and away from systemic solutions.

“How many children do you see walking to school? None because of safety! There are no crossing guards. There is no police.”

– Male Democrat, Framingham

“You didn't use to have to worry about your kids like you do now. There were no abductions.”

– Female Republican, Des Moines

“I just don't feel safe at parks. I guess that is why I carry around mace.”

– Female Teenager, Albuquerque

“I think there is one essential point that is left out of this article, and that is crime. People are too scared to walk anyway.”

–Female Republican, Albuquerque

“How can you make it safe? Then safety also relates to the government. What is the government doing to make our neighborhood safe? I should be safe in my neighborhood, and go out and walk.”

–Female Democrat, Raleigh

While it is tempting to believe that this last quote might advance the cause of food and fitness policies, it is far more likely that once the Safety concern is primed, food and fitness policies will be relegated to much further down on the public's agenda. Of course, safety is a big part of a healthy community – but the question is which takes precedence in public thinking. Is crime reduction a prerequisite for healthy communities? If so, it will be a long wait before policies that would make communities healthier achieve political parity with those that would make them safer. Farmers' markets are no match for crime fighting on the public agenda. We believe the better option for addressing safety is to incorporate it into the mix of public structures and to stress functionality, not safety – viable roads, well-equipped fire and police departments, excellent schools and well-maintained parks – that are all needed to support viable communities.

D. The Mentalist vs. Materialist Challenge

One way to think about the overall frame challenge that emerges from the research is to examine the rationales people use to explain and explain away problems and solutions.

In research conducted originally on early child development, but later extended to other issue areas, FrameWorks has become sensitive to the distinction between mentalist and materialist thinking. Mentalist explanations see individual motivation, morals and internal self-control as the determinants of differential outcomes; reasoning in this way, people struggle to understand how the public environment will make a difference if motivation is lacking. Materialist explanations focus on the way that choices are structured by the places and policies that constrain if not pre-determine outcomes, regardless of individual preference or striving; using this line of reasoning, people would be more attracted to what is on the shelves of the bodega than on the mother's decision to purchase potato chips.

For example, one of the key findings from FrameWorks research on the topic of child development – conducted for organizations that include experts in brain development – is that the public typically defaults to a Mentalist perspective on human behavior, i.e. one that refers to abstractions such as morality, choice, learning and ideas. Applied to early child development, mentalist explanations of early experiences tend to be dismissed as lacking importance and durability. Children are resilient, people say, and they will get over the stressful experiences they confront. Indeed, they may even become stronger for meeting these challenges. People have a much more difficult time adopting a Materialist perspective on behavior and development, which would focus on brain structures, hormones, stress effects and so forth. Yet, it is the Materialist description of development that raises the salience of exposure to early environments and convinces people that, because these experiences weaken the structure of the developing brain, they are indeed important to address. For example, consider the following informant responding to a materialist explanation:

“I think what really gets me . . . is that it could actually have a chemical or biological or some sort of impact on the child's brain. . . . Behavior is one thing, and attitude and personality is one thing, but if it can really negatively impact . . . the chemistry and the makeup of the brain – you can damage that that early – that's really serious. That's more than just having a bad personality, that's really screwing up a kid.”^{xx}

We believe that the issue of community health suffers from mentalist definitions of the problem. If disparities in health outcomes are due to individual character and effort (mind), not to policies that control our access to healthy food and spaces for physical activity (the material world), then logic dictates that we need to change people, not places, attitudes not policies, individuals not communities.

Consider the way in which these informants confront the idea of community planning by reverting to mentalist explanations, with predictable consequences:

“We don't live in small towns where you can walk. Are there communities really designed where people can't walk? I don't think designing the community is the problem, it is a personal problem.”

– Male Republican, Des Moines, IA

“You can plan the whole community but if you don’t get the idea into the minds of the individual, it just isn’t going to happen. You have to break the habits.”

– Male Republican, Des Moines, IA

“It isn’t the plan of the community, it is a mind set.”

– Female Republican, Des Moines, IA

One can think of the tensions between these views as divergent perspectives on the same set of challenges about how healthy communities (should) work:

←	Challenge	→
Mentalist Perspective		Materialist Perspective
Discipline	Explanation of Disparities	Food production
Knowledge	Can be solved by changing	Location of food sources
Choices	Society should deliver better	Transportation services
Strength of character	Focus of change should be on	Zoning and development

E. Making the Frame More Material: the Contribution of a Simplifying Model

One of the cognitive tools that FrameWorks uses to redirect public thinking in more productive ways is the Simplifying Model.^{xxi} FrameWorks defines this frame element as “an explanation that reduces a complex problem to a simple, concrete analogy or metaphor [that] contributes to understanding by helping people organize information into a clear picture in their heads, including facts and ideas previously learned but not organized in a coherent way.”^{xxii} Importantly, Simplifying Models should not be confused with a label or even a specific term. Rather, a Simplifying Model provides a mental image that connects to a schema or frame. The goal of the research process associated with identifying effective Simplifying Models is to determine their precise ability to serve as a conceptual organizing point. Models are carefully evaluated to determine their relative ability to:

- a) have positive impacts on public thinking,
- b) keep people focused on the desired perspective,
- c) help people draw new inferences beyond what they have been told, and
- d) enter the public discourse.

Simplifying Models can be developed to address any number of cognitive gaps associated with a particular issue. For example, they can be used to “concretize” issues characterized in public thinking by a Mentalist approach – focusing on choices, character and willpower – rather than a Materialist perspective which would include concrete factors such as the availability of health services, safe streets or fresh foods.

In this case, FrameWorks determined that the best use of a Simplifying Model would be to express the following causal idea: “specific, concrete factors in a given place create an environment that affects our level of fitness...A central idea here is that it is helpful to

frame a diverse set of concrete and abstract conditions – such as the kinds of businesses that operate in a given community – as though they added up to something like *a physical environment* that surrounds us.”^{xxiii} After winnowing through a number of directions from the previous research,^{xxiv} FrameWorks researchers settled upon the following paragraph, broken down by sentences, which proved most successful in a series of tests:

[Introduction of key topic and term:]	Doctors say that every town, workplace and neighborhood in America can be evaluated in terms of what they call its Food And Fitness Environment.
[Statement of key proposition:]	The Food And Fitness Environment where we live or work is one of the most important things determining whether we end up fit and healthy or not.
[Concrete Examples]	Some factors in the Food And Fitness Environment are fairly obvious, like access to pollution-free air, healthy food and adequate health care. The number of walking paths or fast food restaurants in an area also affects the overall state of public fitness.
[Action implications]	When we improve the Food And Fitness Environment of a place, the health of the people who live and work there improves as well.

It is important to remind ourselves that what is being communicated is an idea or concept. The researchers emphasize that “communicators can make a variety of other choices while conveying the same core idea, as long as they maintain a focus on the right perspectives, carefully avoid various traps, and use the idea as a central organizing point.”^{xxv}

Interestingly, while “fitness” quickly and consistently cues up choices about exercise, the combination of food + fitness + environment was reported by the researchers to work as a coherent set of considerations that added up to big picture, ecological thinking. It subtly suggests that such socially constructed factors as the kinds of businesses that operate in a neighborhood function as an environment. Witness the following reactions to this paragraph, in which informants are asked to explain and interpret the Simplifying Model they have heard presented orally:

According to doctors, the Food And Fitness Environment can be measured in any given town or city. The food and fitness environment is made up of factors such as health services, availability of parks, number of fast food places, etc.

–California woman, age 47

Doctors say that the Food And Fitness Environment of every neighborhood, city and state can be improved. The quality of life is dependent upon healthy food, a pollution free environment, walk paths and placement of fast food restaurants.

–Woman in her 50’s

The focus on *place* has several beneficial effects, according to these researchers:

- It *broadens* the topic beyond the Little-Picture environments of home, social circle and microculture. This issue is not just about your *immediate* surroundings, which you take personal responsibility for, but about larger environments, which can only be improved via decisions on a broader level.
- It helps make sense of the idea of *intervention*. Places, unlike individual choice and character, are managed and are subject to decision-making.
- It reinforces the idea that you can *evaluate and compare* fitness conditions. It is cognitively natural to think about the very real differences between places. (See below for further discussion of the evaluation point.)^{xxvi}

This research concludes that “Americans are confident that we are not as fit as we should be, but fundamentally unclear on why this is so. While advocates have done a successful job in recent years of persuading the public that fitness is important, there is clearly work to be done in helping people sort out what this fact means for our society. The strength of the Food And Fitness Environment model is that it provides average people with a clear and focused new way to think (more productively) about a (vaguely) familiar idea – an organizing idea that can help them make a new kind of sense out of various information they come across. The conversations about fitness that followed exposure to the model were remarkably different from conversations based on default understandings.”^{xxvii}

F. Measuring Frame Effects on Food and Fitness Policies

FrameWorks next took the results of these largely qualitative inquiries into a series of online experimental surveys which afford the opportunity of determining causal relationships between frame elements and frame effects by measuring the impact of discrete exposures to selected passages on public attitudes and policy preferences. In order to be able to prove to field practitioners that some frames work better than others to advance public support, we attempt to show how even very small exposures to frames can result in statistically significant differences in policy preferences.^{xxviii}

As is FrameWorks’ practice, its research team met to review the research findings to date and to settle upon a series of candidate frames to take into experimental testing in order to determine the best combination of frame elements to lift support for specific policies. In so doing, we looked at three specific aspects of frame: (1) Values, (2) Issue Domains, and (3) Simplifying Models. For each of these frame elements, we explain the rationale for our choices below. It is important to note that, in constructing these test frames, we intentionally eliminated those executions that we knew from the research to be problematic. Put another way, each of the frames tested reflects the best possible execution of that idea – and is not necessarily consistent with the execution of that frame in advocacy materials. Given what we know about the power of Health Individualism, and the tendency across the research to revert to Mentalist Thinking, we did not to impair the Fairness frame with these limitations – it was refined to be about fairness

between places.

The power of each of these frame elements was measured against 7 policy batteries: physical education, school nutrition, transportation, parks and open space, community design/development, food and regulation.^{xxix}

1. Values

Advocates for nutrition and physical activity policies had strongly endorsed values of Prevention and Fairness in the materials FrameWorks reviewed over the course of this project. FrameWorks' own research had yielded some ambivalence in the impact of these frames on various policies.^{xxx} In each case, FrameWorks built into the executions as much place-based orientation as possible to overcome problems inherent in the values. In each execution, only a small number of words is varied, and all executions specified consequences for "school test scores, physical fitness and workforce participation." The values tested embraced the following ideas:

Prevention, or the idea that that we should prevent further damage to our nation's quality of life by helping American communities get in good shape. By preventing unhealthy air quality, increasing safety and convenience in environments where people exercise, and increasing regular access to nutritious foods, we would save money and lives in the long run. And, by devoting more resources to addressing these problems before they become even more serious, we may be able to reverse declining school test scores, improve physical fitness and workforce participation.

Fairness, or the idea that that certain communities are struggling because they are not given a fair chance to get in good shape. We need to level the playing field so that every community's residents can breathe healthy air, exercise safely and conveniently, and get nutritious foods. When some communities are denied the resources they need to build these things into their environments, they are unable to improve school test scores, physical fitness and workforce participation.

Considering the qualitative research results summarized in this document, the FrameWorks research team chose two additional values that seemed to hold promise for overcoming the identified dominant frames. These are:

Interdependence, or the idea that public policies often ignore the fact that what affects Americans in one part of the nation affects us all and that we will only succeed when all parts of the nation are in good shape. When we build communities where people can't breathe healthy air, exercise safely and conveniently, and get nutritious foods, these areas cannot contribute as they might to the nation's overall prosperity and the nation's progress is held back. As a result, we are unable to improve school test scores, physical fitness and workforce participation.

Ingenuity, or the idea that we as a society are not devoting enough attention to effective policies and programs that would get American communities in good shape. Smart states

have been able to build communities where people can breathe healthy air, exercise safely and conveniently, and get nutritious foods. These innovative investments have significantly improved conditions by raising school test scores, improving physical fitness and workforce participation in these areas.

In the case of Interdependence, we reasoned that Health Individualism might be best overcome by a frame that poses the idea that quality of life affects us all and makes it more difficult for individualist thinking to yield better health outcomes. With the value of Ingenuity, we speculated that Americans might be willing to solve problems for which they could see ready solutions, by drawing upon a kind of “can do” orientation; this value attempts to set up the kind of positive thinking we saw associated with the “cities that made progress” theme in the focus groups. Both values had proven effective in previous FrameWorks research on topics as diverse as global warming and racial equity.

Results

- **All Values tested have the effect of raising support for every policy battery even after controlling for key demographic and political factors such as race, gender, partisanship, and education.**

Looking at the entire sample, Fairness and Prevention Values have the greatest effects, but all Values move thinking in the right direction. It appears that the Community Design/Development, School Nutrition, and Regulation policies are the most affected by the Values frames, which consistently raised support on these three policy batteries. Since advocates are generally trying to design a single message that will move policy support widely across the population, this finding has important implications for mass media strategies.

Interestingly, quite a bit of the impact of the Value frame elements occurs among men (+10 – 13 points), whose baseline support for the policies is lower (58 supportive compared to 74 for women). All of the Values frames prove significantly powerful with men. This is evidence that the frames are most effective in persuading initial skeptics, and to forging broader coalitions.

The Values also had different effects on partisans. Ingenuity had the largest effect on all partisans across the board. Even so, Ingenuity had a particularly strong effect on Independents and Republicans, while Interdependence had the largest effects on Democrats. The overall impact of the Value frame elements were most successful on Democrats, but the effects on Republicans were fairly strong, consistent, and substantial. This makes sense upon analysis. Independents, who may have fewer ideological cues driving their policy conclusions, may be especially amenable to an appeal that foregrounds solutions. Democrats, who start out with a high degree of support, perform even slightly better when reminded that this is about Interdependence, a core Democratic value.

College graduates show lower initial support for the policies overall than do non-college graduates; they are best motivated in the right direction by the Fairness frame, as are non-college graduates. For college graduates, this movement is directional, but not significant.

What are we to make of this seeming contradiction between the dominance of Health Individualism and other small picture ways of thinking, on the one hand, and the ready ability of these Values to redirect thinking? FrameWorks researchers conclude that, while there are automatic ways of dismissing policy-thinking, these are not deeply entrenched and are assailable through intentional reframing. In other words, framing matters a great deal on these issues and can be used to effectively engage people who have had few opportunities to think about them in a different way.

2. Issue Domains

But Values are not the only frame effects observed in this research. Indeed, there appear to be powerful frame cues communicated from the issue domain of Health^{xxx1}. Put another way, the connection between Health and Health Individualism proved so strong in the qualitative work that it was difficult to get the conversation back to social determinants or Big Picture community-oriented thinking.

One way to think about this is that the choice of issue category or domain (defined as health, environment, economy, education, etc.) may be as important a frame cue on this topic as the choice of the Value. For example, past FrameWorks research has demonstrated that framing global warming in terms of its impact on the environment leads to an entirely different assessment than framing it in terms of its impact on the economy.^{xxx2}

Conversely, we had seen in the qualitative research the potential support for these issues when they were framed around Children. FrameWorks researchers suggested that this domain be explored to see if it could boost thinking across a broader array of policies, not simply related to specific children's policies.

Finally, following the strength of the Simplifying Model with its emphasis on "environment," we wondered whether understanding could be further enhanced by aligning the domain around environment as well. By talking about the same issues in an explicitly environmental or ecological context, might we get more support for policies that address systemic causes?

In this experiment, we randomly assigned exposure to each of the three domains (Health, Children, Environment) with one of the four Values (Interdependence, Ingenuity, Prevention, Fairness) and compared these results to the control mean. Put another way, we asked which combinations of Values and Domains had the greatest effect on support for policies.

The stimuli for the three domains were developed as follows:

Health

Now I'd like to ask you about recent efforts to improve the health of our nation. Experts agree that being healthy requires more than access to medical care. The decisions made in our neighborhoods and municipalities about whether and where to site a supermarket, create mass transit options or maintain a neighborhood park affect the future of our health. Promoting and maintaining individual health, they say, requires attention to community health. Please let me if you have heard of any recent actions in your state or region to improve community Health. In your opinion, should Community Health be given more or less priority when it comes to allocating our nation's resources?

Children

Now I'd like to ask you about recent efforts to improve the status of our nation's children. Experts agree that being healthy and fit in adulthood is largely determined by the communities that we live in as children. The decisions made in our neighborhoods and municipalities about whether and where to site a supermarket, create mass transit options or maintain a neighborhood park affect our children's development. Promoting and maintaining the health of our children requires attention to community environments. Please let me know if you have heard of any recent actions in your state or region to improve healthy environments for children. In your opinion, should children's issues like these be given more or less priority when it comes to allocating our nation's resources?

Environment

Now I'd like to ask you about recent efforts to improve the nation's built environment. Experts agree that being physically fit requires more than access to a gym. The decisions made in our neighborhoods and municipalities about whether and where to site a supermarket, create mass transit options or maintain a neighborhood park affect the viability of these environments. Promoting and maintaining good environments for individuals, they say, requires attention to community environments. Please let me if you have heard of any recent actions in your state or region to improve community Environments. In your opinion, should community Environments be given more or less priority when it comes to allocating our nation's resources?

Results

- **The domains of children, health and environment all consistently move policies in the right direction, but few effects achieve significance.**

A sizable advantage comes from explaining the value of Fairness in the context of Children (+6), or in terms of the Environment (+8) as might be expected. But of equal measure is the power of explaining Interdependence as it applies to Health (+6) or Children (+6).

Here we begin to see an evolving story-line: we need to level the playing field between communities so that children can achieve and prosper and so that all communities have environments that encourage healthy eating and opportunities for exercise. We might also have a story-line along these lines: we should recognize that the health problems experienced in some communities are really problems for all communities; and our children suffer when we do not address these problems with vigor. Each of these story-lines resonates with themes we observed in the qualitative research. What's new here is the confirmation that our execution of the frames as place-based, not group-oriented, actually overcomes the pull of Health Individualism and competition between groups.

Notably, Fairness + Health, a common argument among advocates, was less effective than the other domain combinations for Fairness. In other words, if you plan to talk about Fairness, you are better off to do so in terms of the communities and environments to which people are exposed or the prospects for children to prosper than you are to talk about health disparities.

3. *Simplifying Models*

In this experiment, we randomly assigned exposure to each of the four Values (Interdependence, Ingenuity, Prevention, Fairness) to one of three Simplifying Models and compared these results to the control mean. Put another way, we asked which combinations of Values and Models had the greatest effect on support for policies.

While the **Food and Fitness Environment** had proven attractive in qualitative testing, FrameWorks researchers felt its power should be tested against other models that might be adapted from other FrameWorks inquiries. **Patchwork Effect** was adapted from FrameWorks inquiry on rural issues for the W. K. Kellogg Foundation; it explains why some communities are advantaged and others disadvantaged as a distribution error, without explicitly discussing race or class.^{xxxiii} **Public Structures** was adapted from FrameWorks inquiry on government for Demos; it gets at the need to set up collective action, not merely individual action, through programs and policies. It was designed to test whether this might help us overcome the backlash to government's "interference" in the perceived private realms of eating and exercise.

We executed these three models as follows:

Patchwork Effect

Experts have observed that every town, neighborhood and region in America can be evaluated in terms of how well basic systems and services are distributed. Currently, they say, we have a Patchwork Effect. When some communities are underfinanced or ignored, they are put at a disadvantage, resulting in an uneven patchwork of inadequate transportation, markets without healthy foods, and schools with few physical fitness requirements. Left out of the distribution of goods and services that get communities into the economic mainstream, people's health and quality of life decline. When we improve

the connectedness of a place, the health of the people who live and work there improves as well.

Public Structures

Experts have observed that every town, neighborhood and region in America can be evaluated in terms of its Public Structures. These include, for example, adequate transportation, markets with healthy foods, and schools with physical fitness requirements. Without these structures, however, community success is undermined. When they are well maintained, they form a kind of machinery that makes it possible for Americans to maintain their health and quality of life. When we improve the Public Structures in a place, the health of the people who live and work there improves as well.

Food and Fitness Environment

Experts say that every town, neighborhood and region in America can be evaluated in terms of its Food and Fitness Environment. Where we live or work is one of the most important things determining whether we end up fit and healthy or not. When people do not have access to a healthy environment or opportunities to make healthier choices, they have worse health and a lower quality of life. When we improve these Food and Fitness Environments by creating adequate transportation, markets with healthy foods, and schools with physical fitness requirements, the health of the people who live and work there improves as well. Please tell me if you have heard of the Food and Fitness Environment.

Results

- **The combination of Value and Model offer the largest effects on policies of all three national experiments.**

Fairness combined with the Food and Fitness Environment (+8) was particularly effective in lifting policy support. In fact, the Food and Fitness Environment enhanced the supportive power of all four Values. These results should go a significant distance toward confirming this model's ability to address the cognitive deficits observed in the qualitative research.

The story that emerges from this experiment, then, is that whether we are talking about Fairness among communities, Prevention of negative outcomes, or the fact that what affects one community affects us all, the idea of a Food and Fitness Environment that can be measured from place to place provides a powerful disincentive to individualize.

We should also note that the largest single effect on policy support is that of Ingenuity when paired with Public Structures (+12). This too makes sense. By suggesting that we look for solutions to keep "the machinery that makes it possible for Americans to maintain their health and quality of life," the Public Structures model moves people to policy considerations as well.

4. California Results

While many of these same directional results hold for California, there are also some interesting differences and nuances.

Unlike the national sample, in California no single Value predominates, although both Interdependence and Fairness have the greatest effect on each of the policy batteries, with Interdependence moving all but one battery (school lunch) strongly.

When Value and Domain are combined, Californians exhibit a tremendous jump in support as a result of exposure to Ingenuity and Children (+14). By contrast, Ingenuity and Health show a much more modest effect. One might conclude that Californians are extremely optimistic about being able to change communities to better support children, but they are not optimistic about changing matters to do with health.

When Value and Model are combined, Californians demonstrate positive movement on a number of potential story-lines. The Food and Fitness Environment Model most consistently raises public policy support when compared to the other models. In addition, both the combinations of Fairness with Public Structures (+6) and Interdependence combined with Patchwork move policies in the right direction substantially. It's interesting to note that the latter two combinations are telling a story about inequitable distribution or maintenance among systems.

As we saw in the national sample, California women have much greater initial support for policies and respond very positively to all of the Value frame elements. Interestingly enough, the impact of the Value frame elements on California men are nonexistent. That is, none of the Value frames in the California sample had the effect of raising public policy support among men. FrameWorks researchers conclude that these frames can be very effective among men, given the results from the national sample, however there may be important regional differences (as we see in the California results) that can mitigate support or at least make such support more difficult to capture.

Among the minority subsamples, which include primarily but not exclusively Californians, there are some important differences to note between groups. In general, Ingenuity is more helpful among African-Americans and Hispanics than it is with whites and the general population. One might conclude that, where intergroup competition is prominent, one does better to introduce a frame that speaks to innovative ways to solve problems. Among African-Americans and Hispanics, the most powerful combinations were Ingenuity paired with Public Structures (+4) or with the Food and Fitness Environment (+6). Among whites, the most powerful combination was Interdependence and Patchwork (+4).

5. Putting the Research Results in Context

How do we interpret this final round of research in the context of the stubborn frames observed in the early part of this analysis?

First, we conclude that the dominant frames are not as entrenched as we assumed them to be. The good news for policy experts and public health advocates is that Health Individualism is assailable. Moreover, it is assailable using multiple frame elements that can be combined in ingenious ways to tell a variety of consistent and reinforcing stories.

The problem appears to be that there are very few alternative frames available to most people when they confront these issues. In the next section, we'll examine the particular challenge posed by current media frames. But the clear take-away from this research is that, without such cognitive tools as Simplifying Models and place-reorienting Values, systems thinking about community health is, as Claude Levy-Strauss put it, "hard to think."

There is a tremendous opportunity to put forward new ways of thinking that combine food and fitness with other community changes that, in turn, attach to broad American values. The danger comes in inadvertently connecting to the wrong American values – triggering values of Choice, Hard Work and Individual Autonomy. By translating the value of Fairness into an evaluation of the resources that various communities have to improve conditions, we were able to overcome the tendency to hold individuals accountable for their choices and to hold groups accountable for their efforts – tendencies observed so consistently in the qualitative research.

In the end, the research demonstrates that advocates have novelty on their side – the very combinations we explore above paint a picture that seems fundamentally new to Americans and causes them to re-examine their positions. As one Seattle focus group participant concluded:

"I would say that one of the things that was refreshing with both articles is that they tied together a lot of pieces that often they talked about in isolation. Urban planning never gets tied with PE, they are isolated issues, and both these articles tied them both together very well; and really pointing out the root causes, the way the medical cost, education and urban planning are tied together."

G. Views vs. News: The Pictures in Our Heads and the Pictures on our Screens

While we would normally include findings from FrameWorks' media content analyses in our explanation of dominant frames, we have chosen to incorporate these findings as part of the framing challenges that advocates face in telling new stories about community health. It is critically important that policy experts and advocates recognize the storytelling challenge that confronts them in upending the dominant frames. In this context, the media content analyses conducted for this project are extremely instructive.

FrameWorks researchers examined all articles from July 17, 2006 through August 31, 2006 in nine major media outlets, encompassing three national newspapers, three national

news magazines and the three major broadcast networks. We identified and analyzed a total of 95 stories that addressed any of the following issues:

- (1) food systems and access to food;
- (2) physical activity and the necessary infrastructure;
- (3) school programs and policies;
- (4) workplace conditions; and finally
- (5) discussions of the causes, solutions and consequences of excess weight.

From this report, we gleaned some important insights into interplay between the stories to which people have been exposed and the difficulty they exhibit in thinking systemically:

- Of the 95 relevant stories that were secured from the nine media outlets over this period, $\frac{3}{4}$ of all coverage focused on individual aspects of weight and nutrition.
- Only 1 story in 4 addressed any systemic or institutional factors.
- There were 3 times as many claims of individual responsibility (including) as there were of social responsibility.
- No assertion that individuals were responsible for obesity was ever rebutted, while opinions that blamed social institutions were rebutted almost half the time.

In reviewing the coverage, these researchers conclude that “the notion that individuals, parents, or families are responsible for obesity was treated as a consensually accepted fact requiring no debate. When social structures (mostly the food industry) were held responsible, journalism’s point-counterpoint model for dealing with controversies went into effect, and their representatives were given the opportunity to rebut the charge. In this regard, the media’s portrayal of this topic was probably typical of how it addresses public health issues.”^{xxxiv}

To drive home this tendency, we offer the following exchange with McDonald’s Chief Operating Officer Don Thompson represents the debate over fast food restaurant responsibility:

Campbell Brown (anchor): Whose fault is it if you're fat? The CDC says two thirds of all Americans are overweight and that 30 percent of us are obese. But can we really blame the fast food industry? Well, some are trying. ...

Stone Phillips reporting: In the 1990s, lawyers successfully used the courtroom to curb smoking. Now some of the same lawyers want to sue the fast food industry to curb obesity. When somebody says, 'Eating at McDonald's made me fat,' what do you say?

Don Thompson: You know, I couldn't speak to why a person would say that.

Phillips: Don Thompson is McDonald's USA chief operating officer.

Mr. Thompson: As McDonald's, we're not the cause of obesity.

Phillips: But in August 2002, two girls claimed just that in a lawsuit, alleging that McDonald's was the blame for their obesity. When you first heard about that lawsuit, what did you think?

Mr. Thompson: Honestly, I thought it was a hoax. I really did. And as it moved forward and we heard more about it, I really felt like someone was deferring their responsibility.

Phillips: Do companies like McDonald's bear some responsibility at a time when obesity is a major problem in this country?

Mr. Thompson: Well, I think what level of responsibility we do have is to provide menu choice. –*NBC Nightly News, August 18, 2006*

Or, consider the discussion in USA Today (7/20/06, D6) in which Kelly Brownell of the Rudd Center for Food Policy and Obesity at Yale spoke for the critics, “Something needs to be done about advertising to kids, which is incredibly pernicious. Our government won’t even admit it is a problem.” The story then turned to Daniel Jaffe of the Association of National Advertisers for a rebuttal, “We do not believe that stopping all advertising of foods to kids or putting massive government restrictions on it is going to solve the childhood obesity crisis. That hasn’t worked anywhere.”

The point we wish to make in citing the media pattern of coverage for these issues is that advocates will have to work hard to break this paradigm. Framing tools like Simplifying Models and Values can be slipped unobtrusively into conversation and coverage to help cue up different ways of thinking. But strategies that begin to supplant this pattern of coverage will require an orchestration of new frame elements over time. In so doing, they may require extra-media forums for the establishment of new ways of thinking. We note additionally that only 4 of the 95 articles we secured were op/ed pieces. This might also suggest that this bully pulpit is being underutilized by food and fitness advocates, policy experts and scientists.

H. Toward A New Grammar of Public Health

“The mission of public health – improving the health of populations – is difficult to advance in public discourse because a language to express the values animating that mission has not been adequately developed,” rote Lawrence Wallack and Regina Lawrence in the American Journal of Public Health.

This FrameWorks inquiry has been devoted to identifying whether, indeed, a new language is required and, if so, what might prove dysfunctional in the old language, what the new language would have to accomplish and what should constitute its grammar.

Wallack and Lawrence went on to speculate that “Egalitarianism, humanitarianism, and social responsibility – values that lie at the core of a social justice orientation to public

health – often seem inadequate to respond effectively to the moral resonance of individualism. Yet in a culture preoccupied with personal responsibility...it is imperative for the public health profession to tap into these countervailing values...^{»xxxv}

This inquiry has confirmed the analysis put forward by Wallack and Lawrence. At least for the issues that concern The California Endowment and the W. K. Kellogg Foundation, the old language of public health does not seem to have been learned and internalized by the citizenry. But while the diagnosis may be correct, we would assert that the prescription needs tweaking. Efforts to use a social justice message directly, i.e. as a fairness argument for individuals and groups, also stand little chance of being heard. It is only by translating these values more ecologically, into fairness between communities with opportunities to fix structures not people, that we begin to see the outline of a new public health vernacular.

The grammar of that language is offered up here in broad brush stroke. It focuses on Values that direct people to solutions, to shared fate and to fairness in the distribution of resources among communities. It uses Simplifying Models like the Food and Fitness Environment to further anchor thinking in tangible ways. And it takes advantage of Americans' willingness to see the importance of society's controlling and protecting environments for children, even when they remain ambivalent about curtailing their own choices or letting others off the hook for individual responsibility. Together, these elements of a new grammar hold great promise for community health storytellers.

I. Applications

A separate Toolkit is available to demonstrate how these recommendations might be incorporated into such vehicles as interviews, op/eds and presentations. Below we offer the bare-bones skeleton that informs these applications.

DO

- **Begin all communications about food and fitness policies by explaining the broader societal end-goals or Values to which food and fitness policies are the means.**
- **Use Values that explain why some places are doing better than others because of problems in the distribution of resources.**
- **Where intergroup competition is prominent, use values that underscore mutual benefits, like Interdependence or Ingenuity.**
- **Get environmental thinking into the discussion as soon as possible, using the Food and Fitness Environment simplifying model.**
- **Put solutions high in the communiqué, and emphasize their replicability and their impact on community.**
- **Where corrections to existing systems are required, emphasize that mistakes can be corrected.**
- **Strongly assert a societal role by connecting interventions to outcomes in causal sequences.**^{xxxvi}

- **Emphasize the values that should inform government and that it should be used as a tool to advance – from advancing the common good and improving quality of life to protecting children.**
- **Use examples from issues like the Farm Bill and public schools where government is a given.**
- **Recognize the potential power of frames to engage men, highly educated men, Independents and Republicans on these issues, thereby building a bigger coalition for policies.**
- **Look for visual cues that situate people in environments and demonstrate material reasons for differential outcomes.**
- **Show community actors planning the future of their communities in thoughtful, deliberate ways.**
- **Bundle issues of safety into other public structures, such as assuring the maintenance and viability of roads, schools, police and fire departments.**

DON'T

- **Begin any statement with an assumption that domains like Health or Children will automatically cue up larger societal Values.**
- **Use Values that direct attention to individuals or groups, or to their efforts to overcome conditions.**
- **Don't pit groups against each other, or assume that appeals to Fairness will resonate in minority communities.**
- **Focus on habits, choices, or other mentalist explanations for behavior, such as healthy or unhealthy lifestyles.**
- **Emphasize problems without connecting them to solutions.**
- **Describe problems in such a way that they seem old, entrenched and intractable.**
- **Attempt to “balance” individual responsibility with a dose of societal responsibility.**
- **Argue for a role for government in public health, without explaining the larger goals to which government is being applied as a necessary and appropriate means to a public end.**
- **Use examples from business and marketing (i.e. advertising) which can distract people from seeing a role for government.**
- **Assume that these issues must remain partisan and that “the usual suspects” are the most likely allies to recruit into your coalition.**
- **Use visuals and stories that close in on individuals eating, exercising or making choices.**
- **Show communities as victims or without agency, or as anomalies or special cases.**
- **Stress the safety of places as a deterrent to physical activity.**

Example of an Execution:

The beauty of the FrameWorks research on this topic is that it supports numerous executions that can be developed incorporating the framing recommendations. Here is just one example – others are provided in the companion CD Toolkit that accompanies this Memo:

Smart states are those that pay attention to effective policies and programs that would get communities in good shape. (INGENUITY VALUE). Experts agree that being healthy and fit in adulthood is largely determined by the communities that we live in as children. (CHILDREN AS DOMAIN). When schools are provided with nutritious foods, they become true learning environments that shape strong minds and bodies. (CAUSAL SEQUENCE, MATERIALIST PERSPECTIVE). Cutting back on healthy foods and physical education in schools is a losing proposition for this country. (SHARED FATE, CONSEQUENCES). Today half of all students attend schools that have reduced their phys. ed. class to just one or two days per week. Part-time fitness is no more effective than part-time reading or math instruction. We need to pay more attention to the Food and Fitness Environments that will determine whether our children end up healthy or not (SIMPLIFYING MODEL). One way we can do this is to.....

J. Other Products

This Message Memo is part of a family of products prepared by the FrameWorks Institute to inform public conversations about public health.

A companion CD-Rom Toolkit, “Talking Community Health,” will be produced in Spring 2008. It includes all research conducted for The California Endowment and W. K. Kellogg Foundation as part of this project, as well as an extensive array of applications materials, from model op/eds to FAQs. These applications materials use the MessageMemo as their point of departure and explain how one might use it to inform the day to day challenges that confront public health advocates.

An EWorkshop, an interactive online module that explains the research and interpretation as well as providing opportunities to test one’s learning, will be posted in Summer 2008.

Many related materials – explaining the basics of framing and findings from important related research projects – are posted at www.frameworksinstitute.org.

To connect to organizations nationwide that are organizing around these issues, please refer to the W. K. Kellogg’s Food and Fitness Initiative at <http://www.wkkf.org> or go to <http://www.calendow.org/healthycommunities>.

About FrameWorks Institute: The FrameWorks Institute is an independent nonprofit organization founded in 1999 to advance science-based communications research and practice. The Institute conducts original, multi-method research to identify the communications strategies that will advance public understanding of social problems and improve public support for remedial policies. The Institute’s work also includes teaching the nonprofit sector how to apply these science-based communications strategies in their work for social change. The Institute publishes its research and recommendations, as well as toolkits and other products for the nonprofit sector at www.frameworksinstitute.org.

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Please follow standard APA rules for citation, with FrameWorks Institute as publisher. Bales, Susan Nall (2008). *Framing Community Health as if Food and Fitness Mattered*. Washington, DC: FrameWorks Institute.

ⁱ Lawrence Wallack and Regina Lawrence. “Talking About Public Health: Developing America’s Second Language.” *American Journal of Public Health*. April 2005, Vol. 95, No. 4: 567-570.

ⁱⁱ For one example among many, see “A Content Analysis of Media Coverage of Health Care and the Uninsured 2002: A FrameWorks Research Report.” 2003. Washington, DC: FrameWorks Institute.

ⁱⁱⁱ Geoffrey Rose. *The Strategy of Preventive Medicine*. Oxford: Oxford University Press. 1992.

^{iv} W. K. Kellogg Foundation Food and Fitness Letter of Invitation, undated.

^v For more on framing in general and Strategic Frame Analysis in particular, see www.frameworksinstitute.org.

^{vi} Ichiru Kawachi and Lisa F. Berkman (eds). *Neighborhoods and Health*. Oxford University Press, 2003.

^{vii} *Ibid.*, p. 27 – 28.

^{viii} See “Talking Rural Issues: A FrameWorks Message Memo.” Washington, DC: FrameWorks Institute. October 2005. Also see FrameWorks’ E-Workshop on rural issues at www.onlinearc.com/frameworks/index.html.

^{ix} See “Framing the Food System: A FrameWorks Message Memo.” Washington, DC: FrameWorks Institute. August 2006. Also see FrameWorks’ E-Workshop on Food Systems at <http://hollyworks.com/frameworks/course>.

^x See “Making the Public Case for Child Abuse and Neglect Prevention: A FrameWorks Message Memo.” Washington, DC: FrameWorks Institute. April 2004.

^{xi} See “Talking Early Child Development and Exploring the Consequences of Frame Choices: A FrameWorks Message Memo.” Washington, DC: FrameWorks Institute. July 2005.

^{xii} This was done in two phases, one in California and one nationwide. They are summarized respectively in “Civic Wellbeing: An Analysis of Qualitative Research Among California Residents.” Washington, DC: FrameWorks Institute. September 2006; and “Discussing Public Environments in the Community: A Focus Group Report about Nutrition and Physical Activity.” Washington, DC: FrameWorks Institute. 2007.

^{xiii} See “Civic Wellbeing, p. 12.

^{xiv} *Ibid.*

^{xv} We refer here to the U.S. farm bill that serves as the primary agricultural and food policy tool of the Federal government. This omnibus bill is passed every several years by the U. S. Congress and includes subsidies for farmers as well as the food stamps program and other rules government school lunch and breakfast programs.

^{xvi} This has been further confirmed in proprietary research conducted on commercialization of children's issues and spaces in Kansas for Kansas Action for Children. See "Private Enterprise in Public Schools: Communicating School Commercialization: A FrameWorks Message Memo." Washington, DC: FrameWorks Institute. November 2007.

^{xvii} Ibid.

^{xviii} See "Discussing Public Environments in the Community," p. 18.

^{xix} See "A New Dominant Frame: The Imperiled Child" (FrameWorks Ezine #22) at <http://frameworksinstitute.org/ezine22.html>.

^{xx} "Moving the Public Beyond Familiar Understandings of ECD: Findings from the TalkBack Testing of Simplifying Models." Washington, DC: FrameWorks Institute. November 2003.

^{xxi} See "Opening Up the Black Box: A Case Study in Simplifying Models" (FrameWorks Ezine #19) at <http://frameworksinstitute.org/ezine19.html>

^{xxii} Bales, S. "Framing Public Issues: The FrameWorks Toolkit." Washington, D.C. FrameWorks Institute. 2002: 26.

^{xxiii} "A Systematic View of Food and Fitness: Findings from the Simplifying Models Research." Washington, DC: FrameWorks Institute. March 2007: 2, 10.

^{xxiv} Ibid, p.10.

^{xxv} Ibid, p. 11.

^{xxvi} Ibid, p. 14.

^{xxvii} Ibid, p. 31.

^{xxviii} For more on this method, see "Community Health Framing Effects" (working title): A FrameWorks Research Report. Summer 2008. In brief, the venue is the world wide web, where an interactive survey is posted. Respondents are recruited from a national panel and matched to the respective population; in this case, the experiment was administered to 4500 adults in the United States, with an oversample of 2031 in California. The California sample included an oversample of African-Americans and Hispanics. Each respondent was exposed to various combinations of frames, or to a control condition that received no stimulus. They are randomly assigned to a treatment group or to the control. After exposure to the framed passages, they answer a series of questions to evaluate their policy preferences in 7 different areas: physical education, school nutrition, transportation, parks and open space, community design/development, food and regulation.

^{xxix} Ibid. In brief, policies were evaluated as follows: Researchers pre-tested the various items with a small pilot sample of 125 people. They first checked the inter-item correlations between the respective variables within each issue domain. They then performed a factor to confirm that the issue domains were in fact distinct. The results indicated that the "batteries" represented distinct underlying factor structures. Finally, they performed a Cronbach's alpha test for the fidelity of the scales. All tests demonstrated that the respective scales displayed coefficients of .70 or higher; well within the range of acceptability.

^{xxx} For prevention, see CT focus group research and for fairness, see race and rural.

^{xxxi} For distinctions between Values, Domains and other frame elements, see "A Five Minute Refresher Course in Framing" (FrameWorks Ezine #8) at <http://frameworksinstitute.org/ezine8.html> or "Framing Public

Issues," also at this website.

^{xxxii} "Talking Global Warming: A FrameWorks Message Memo." Washington, DC: FrameWorks Institute. November 2001.

^{xxxiii} For reasoning behind the avoidance of race cues, see "FrameWorks MessageBrief: Framing Race." Washington, DC: FrameWorks Institute. March 2008.

^{xxxiv} "Calories, Not Communities: A Media Content Analysis of Food and Fitness News." Washington, DC: FrameWorks Institute. March 2007.

^{xxxv} Wallack and Lawrence, April 2005.

^{xxxvi} See "Strengthening Advocacy by Explaining Causal Sequences" (FrameWorks Ezine #31) at <http://frameworksinstitute.org/ezine31.html>.