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# FRAMING

# PUBLIC HEALTH

## [ MORE THAN A MESSAGE ]

LORI DORFMAN

**H**ow should public health advocates answer challenging arguments from companies that produce harmful products? Tobacco companies say they sell a legal product. Alcohol companies insist that most people drink responsibly and claim companies shouldn't be blamed if some people abuse their products. Junk food purveyors say it is the parents' responsibility to control what children eat. Car companies say that the key to greater safety on the road is changes in driver behavior.

These are tough arguments to counter. After all, each one is truthful — if incomplete. But each industry argument has a common feature: each frames the debate in terms of a single, widely-held, important American value: personal responsibility. Trouble is, when public health battles are framed solely in terms of personal responsibility, audiences can't see how the settings and circumstances surrounding individuals contribute to their health status. Public health advocates need to "reframe" the message so the landscape around individuals comes into view. When public health advocates make the landscape visible, they bolster their arguments for public health solutions.

Framing involves more than a message — knowing what changes will advance public health interests comes first, followed by a clear analysis of what it takes to create change, usually policy change. The next step is framing messages to make the case because, if the change is significant, it will be contested. Inevitably, environmental changes are more controversial than changes in personal behavior because they generally require a shift in resources or responsibility. How the message is framed can either strengthen support for healthy public policy, or reinforce the opposition.

Recent debates over whether to sell soda to school children is a good case in point. Berkeley Media Studies Group's study of that news coverage shows that public health advocates are good at explaining the complexities around the rise in childhood obesity — almost too good. By elaborating the various aspects of obesity, many advocates failed to focus on the value of the policy at hand, in this case, eliminating selling soda in schools.

Public health advocates need frames for messages that emphasize shared responsibility for health. In the case of sodas in schools, certainly students should be taught to make healthy choices and take responsibility to do so. But do students determine what is made available to them in the vending machines in their schools? Are students responsible for the food selections in other parts of campus? It is the adults who have the responsibility to ensure that schools are doing right by the children in their care. While the lack of adequate funding for schools is a fact, it is not the responsibility of students to pay for their education by purchasing sodas and other commercial products from their schools — particularly when those products are not good for health.

These issues will be debated in highly visible public settings such as school board hearings. Typically, the arguments surrounding the social changes — be they policies to restrict sodas in schools or create safe spaces for walking and play, among others — will be contested by well-financed opponents working feverishly to protect their profit margins. Public health practitioners and their allies must pay close attention to how they craft their arguments, and then see that those arguments get a fair hearing in public discussion. Protecting the marketplace is important, no doubt about it. But when market excesses lead to poor health, they can be fairly restricted. And we should say so, loud and clear. ■