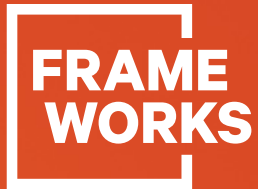


Framing for a Healthy Hawai'i

Julie Sweetland, PhD, Senior Advisor



January 31, 2024

Prepared for Hawai'i Department of Health & Office of Health Equity

FrameWorks is on a mission...

to advance the nonprofit sector's capacity
to **frame the public discourse** on social and scientific issues

Our partners consciously reframe their issues

- By moving **from a vulnerability frame to a brain development frame**, the early childhood movement has reoriented funding, expanded programs, and improved outcomes
- By telling stories that **balance the perception of opportunity and risk**, advocates for healthy adolescent development are shifting the policy climate on a range of youth issues
- By **shifting emphasis from “preventable problem” to “unjust conditions,”** the tobacco control movement is moving next-generation protections that tackle health disparities
- Advocates for vaccination are **giving up war metaphors and adopting new, tested metaphors** that reduce perception of risk and increase sense of collective responsibility

framing =

choices in how
we present ideas

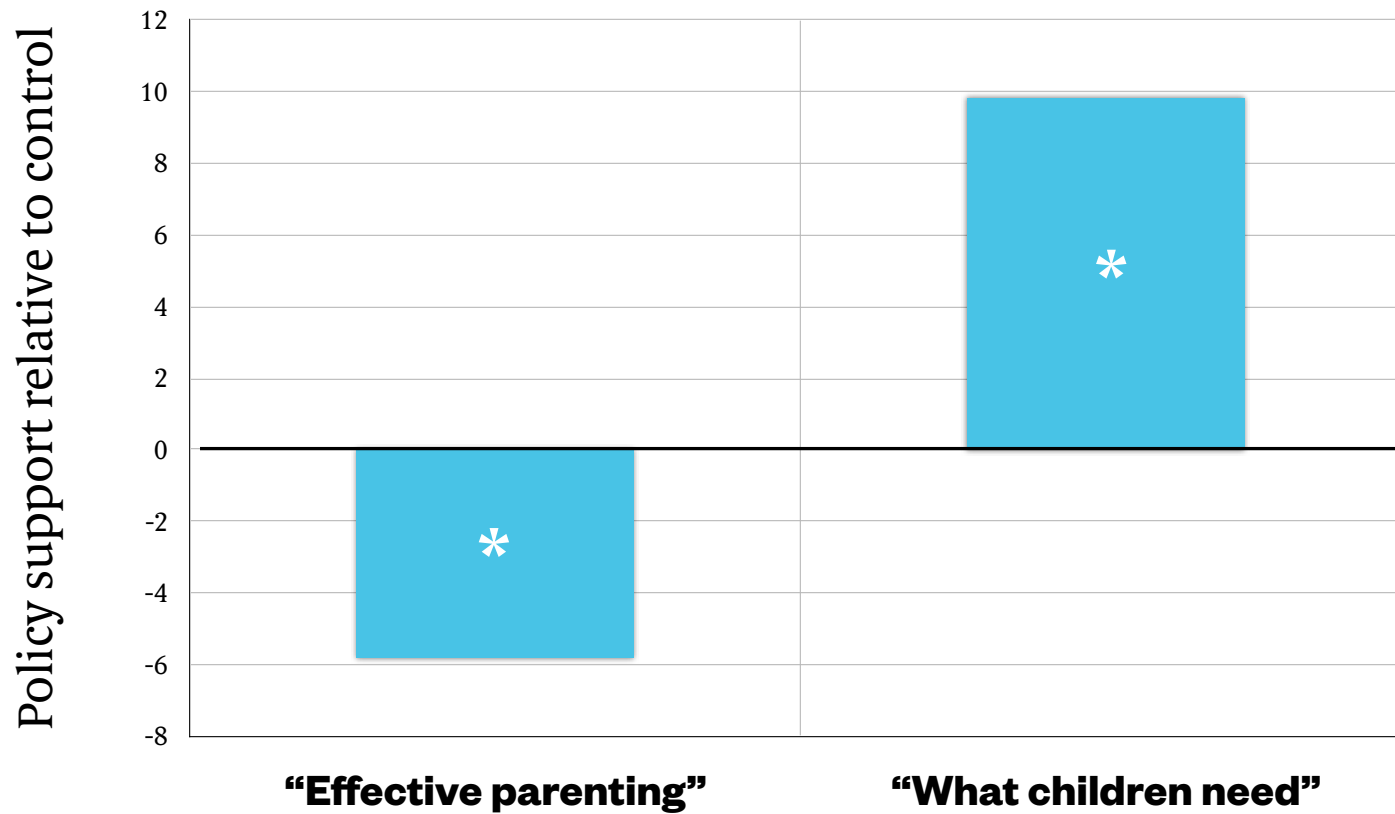


differences in how
people respond

Framing can open minds to science - or close them

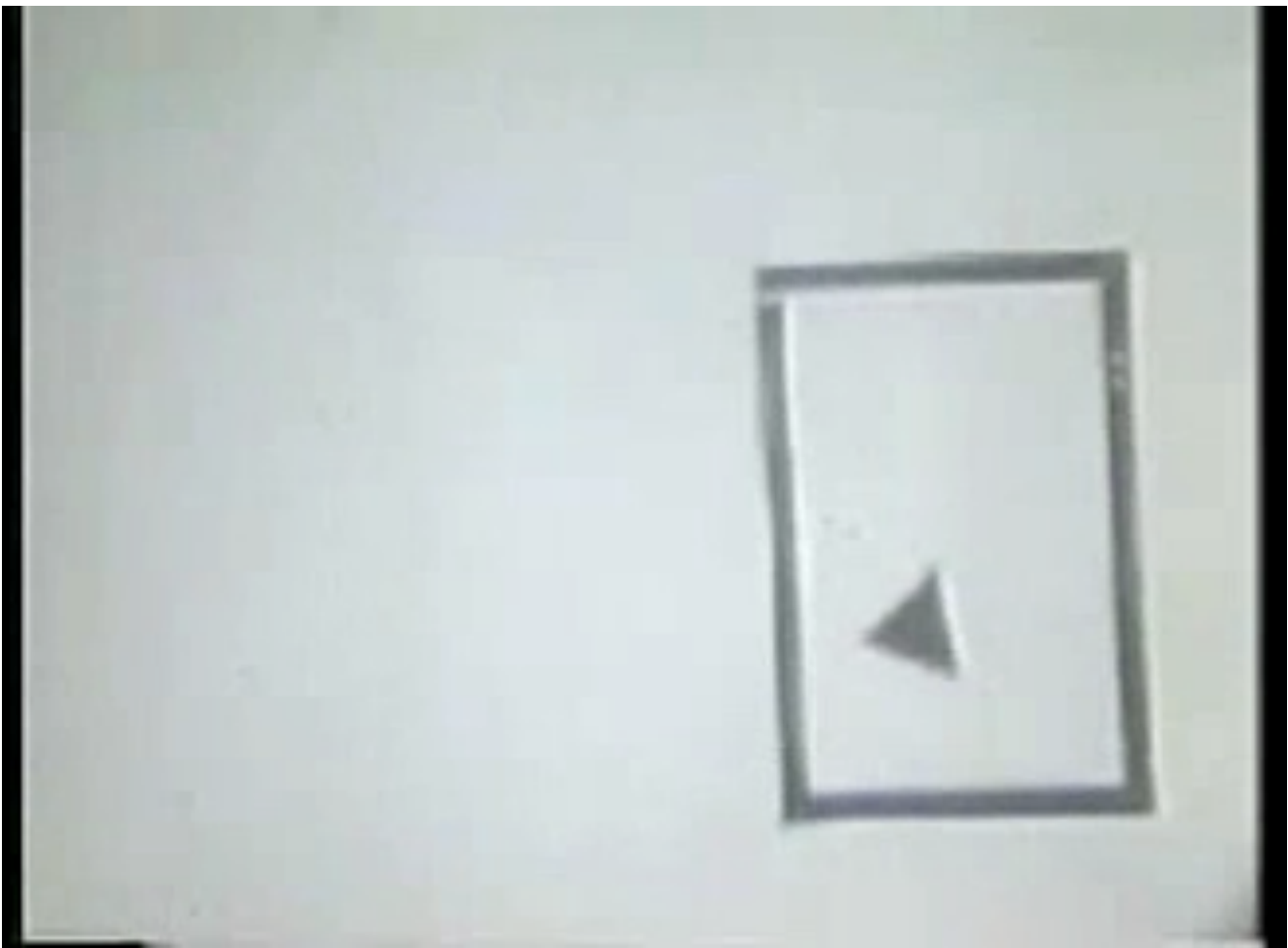
Selected results from experimental survey FrameWorks conducted in Australia, 2018

** = $p < .01$*



Reframing strategy #1

Navigate existing narratives.

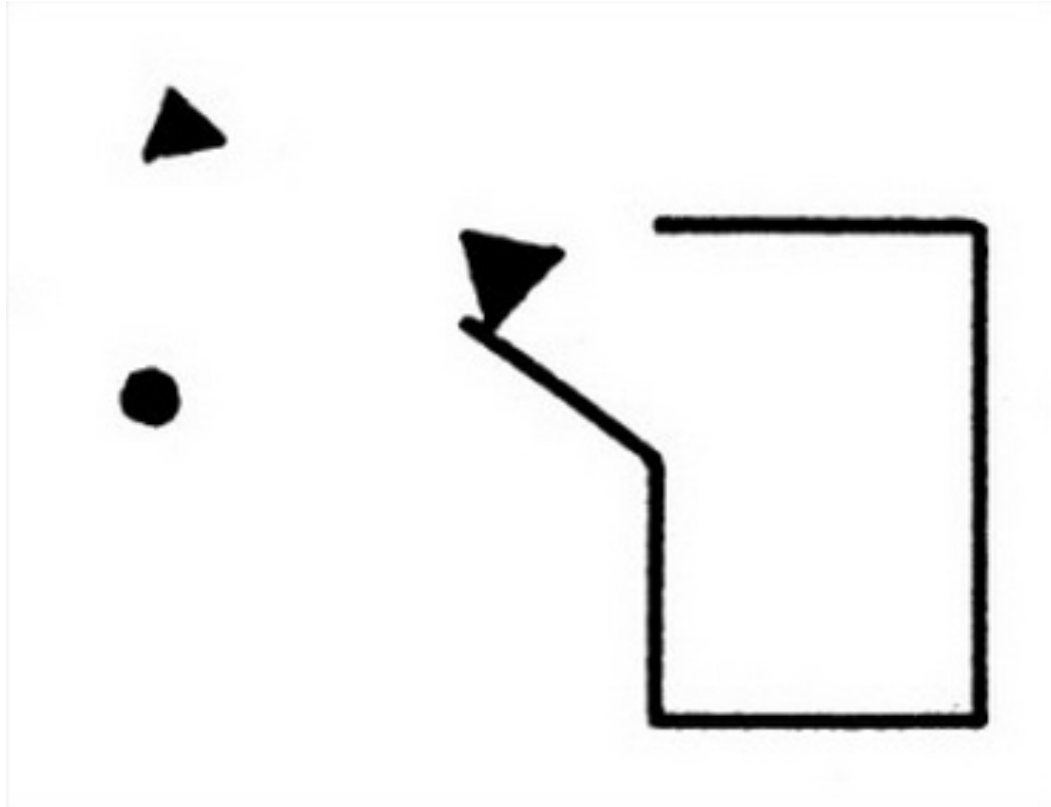


Share out in the chat

- If you made up a story in your mind as the animation played, please share it in the chat!
- Read others' stories. Do you notice any similarities?



There's a story there - whether or not you're telling it

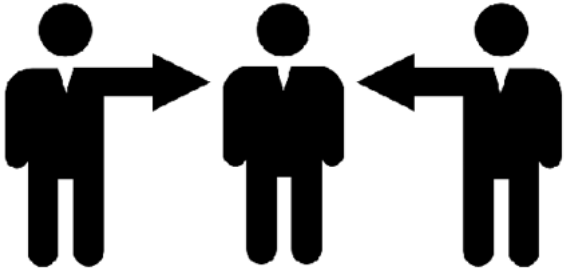


Common mindsets can limit support for change

Icons from the Noun Project



Individualism



Otherism



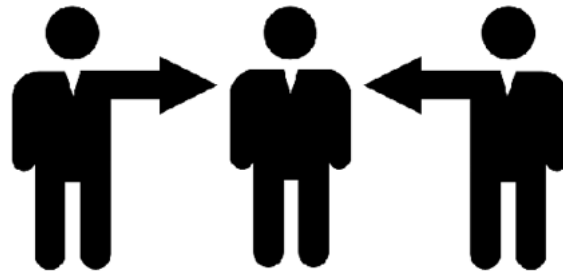
Fatalism

How do these mindsets show up in Hawai'i on health equity topics?

Icons from the Noun Project



Individualism



Otherism

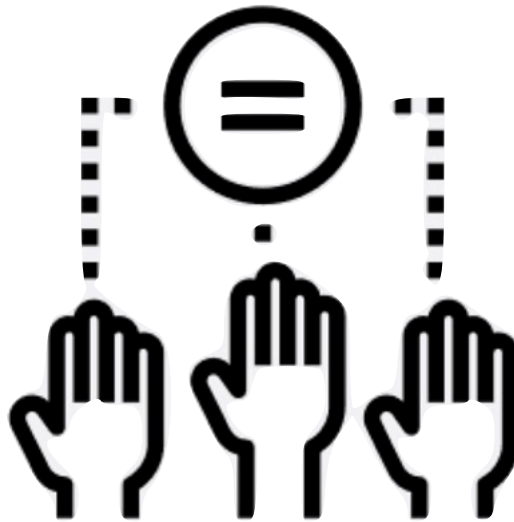


Fatalism

Reframing reinforces alternative mindsets



Context Matters



We're In This Together



We Can Redesign This

Use a broad, generous “we”

framed with “othering” language

Efforts to prevent isolation among the elderly population are critical.



reframed with “togethering” language

We need ways to stay connected to our communities as we age.

Transition-age foster youth require supports beyond their 18th birthday.



We all need support in times of transition. Our young people in foster care are no exception.

Black women are up to three times more likely to die from pregnancy-related health complications than white women, even when controlling for socioeconomic status.



Every expecting mother should receive safe, respectful maternity care. We need to change the fact that Black women can't count on this essential care.



Examples of Framing Choices

Tone

Values

Numbers

Metaphors

Narrative

Messengers

Examples

Context

Visuals

Order

Explanatory Chains

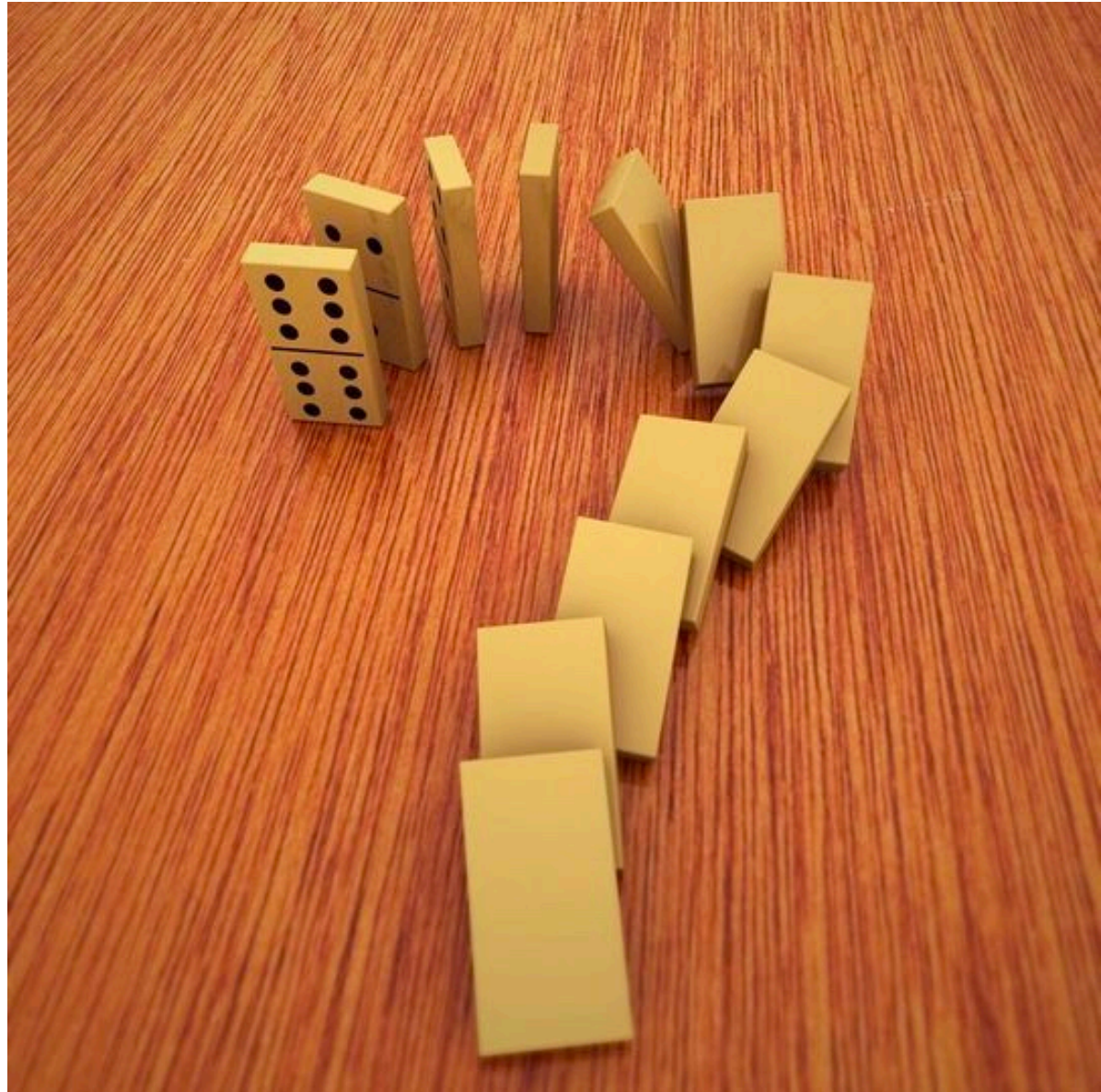
Solutions

Reframing strategy #2

Attribute responsibility carefully.

Context helps to attribute responsibility to systems

- Attribution means the way we explain the causes of behavior, events, or conditions
- Attribution of causes has a major effect on how people think about solutions



When people feel empowered to make a difference in their communities, dating violence is less prevalent in that area.



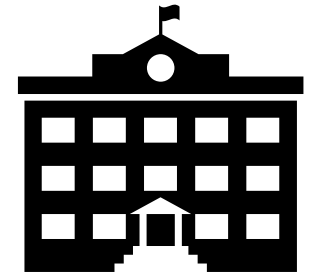
Pediatricians can steer youth away from IPV when they're trained to have conversations with adolescents about intimate relationships.



17-year-old Kaya is in a violent dating relationship.



Intervention programs are more likely to make a difference when they are tailored to participants' culture and values.



School-based courses can equip students with skills that help to build healthy relationships and avoid violent conflicts.

Missing attribution

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

Systems-level attribution

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

Individual attribution

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

Systems-level attribution

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

Framing with context

- Think of a way that Individualism often shapes how people think and talk about your health equity issue.
- On the Jamboard, jot down how you might reframe to emphasize context.
- Example:

Moms quit smoking —> systems provide cessation treatment



Reframing strategy #3

Build a strong frame step-by-step.

This narrative structure fills in the blanks productively

1. Principle

Establish an outcome that matters to us all.

Tap into a collective concern - ideally, using a tested values message.

2. Process

Explain how it works.

Establish a mechanism or process at play, using explanatory techniques

3. Problem

Introduce tension into the plot.

Make social conditions or structures the problems. Paint them as serious threats, but not insurmountable ones.

4. Proposal

Point to solutions.

Ward off fatalism by highlighting possible approaches. Frame with collective solutions.

A starter narrative for health equity in context of chronic disease

1. Principle

Justice/ Fairness.

All people should have a full, fair, and just opportunity to be as healthy as possible.

2. Process

Chronic Disease

When people develop chronic diseases, it undermines health and wellbeing. We have proven ways to prevent most chronic conditions.

3. Problem

Uneven Prevention

While many of us benefit from policies that help to prevent disease, they often don't cover places where marginalized groups live, learn, work, or age.

4. Proposal

Ensure prevention everywhere

We can devote more resources to communities experiencing most harm

We can address root causes

Example: Equitable Access to Physical Activity

1. Principle

Justice and fairness

A just and fair society values every person and their health. Our commitment to justice calls us to ensure that everyone has the opportunity to be physically active, because it's essential for all.

2. Process

Explain how the issue works.

Physical environments, social contexts, and access to health advice can support or hinder physical activity.

For example, in areas with well-lit sidewalks that lead to everyday destinations, people tend to walk more.

3. Problem

Put some tension in the plot.

Right now, as a society, we accept that some communities benefit from built environments that make it safe, easy, and socially acceptable for people to be active outdoors - and others don't. Similarly, our systems offer some people medical guidance and programs that can encourage physical activity - but not everyone.

4. Proposal

Point to solutions.

We must partner with communities to redesign built environments to promote physical activity. We should make changes to the healthcare system so that everyone has access to the care they need, and so that guidance on physical activity is part of standard care.

Example: Equitable Protection from Commercial Tobacco

1. Principle

Justice

A just and fair society values every person and their health. Our commitment to justice calls us to address the harmful role of commercial tobacco.

2. Process

Tobacco Control

As a nation, we have steadily expanded tobacco protections. We are less exposed to smoke in the air and see fewer ads for deadly tobacco products.

3. Problem

Uneven Protection

But these protections, which most Americans can take for granted, are less likely to cover the places where people of color live, work, and learn.

4. Proposal

Address Policy Gaps

To treat everyone fairly, we must extend tobacco protections to every community, with no exceptions.

Questions? Reactions?

- What's your initial reaction to the 4-part narrative structure?
- Are there elements of it that seem challenging?
- Do you have questions or other comments?



Reframing strategy #4

Frame toward solutions.

START HERE!



4. Proposal

**Ward off
fatalism by
highlighting
possible
approaches.
Frame with
collective
solutions.**

Effective public health messaging emphasizes collective solutions

- When we raise a big problem but don't mention the possibility of big solutions, we can spark or reinforce fatalistic attitudes.
- Many public health issues can't be solved without collective solutions—yet people are unlikely to know about them.
- Emphasizing collective solutions focuses people's attention on the policy context, which helps to reduce the tendency to blame individuals and affected communities.

Instead of/in addition to this...

Quitlines are proven to increase people's chances of quitting successfully and staying quit.

A quit coach works with people who smoke to develop plans that are personalized for their needs.

Try this...

States can make sure that insurance coverage is never a barrier to evidence-based tobacco cessation treatments, like quit coaching.

As of 2018, only 15 state Medicaid programs fully covered cessation services for participants.

Examples of strategies that states and communities can use are:



Provide barrier-free, widely promoted, coverage for all evidence-based cessation treatments by all types of health insurance.

For example, as of 2018, only 15 state Medicaid programs fully covered tobacco cessation (quitting) services for all traditional Medicaid enrollees.⁴⁷



Increase access to sensitive quit-smoking services.

When it comes to health issues, one size does not fit all. Different people and communities have different needs and make decisions in different ways. For example, alternate cessation strategies may be helpful for those who smoke few cigarettes per day or only on some days.⁴³



Share health messages that reach A/NH/PI people.

Mass media campaigns are proven to increase smoking cessation, prevent tobacco use initiation, and reduce the prevalence of tobacco use. Anti-commercial tobacco* messaging and mass media campaigns, like [CDC's Tips from Former Smokers® \(Tips®\)](#), can feature testimonials from people from many racial and ethnic groups. Some *Tips* advertisements have been translated into Chinese (Mandarin/Cantonese), Korean, and Vietnamese and direct people to the [Asian Smoker's Quitline](#) [↗](#). Additional information and resources can be found on the *Tips* [Asian American](#) webpage.

Use the 5 C's to Frame Solutions



Collective solutions mobilize structural reform through coordinated action.



Concrete solutions are specific and clearly defined.



Causal solutions don't just alleviate the symptoms—they address the cause.



Clear solutions use familiar, everyday vocabulary—not jargon.



Credible messengers and supporting evidence helps to build trust and engage unlikely allies

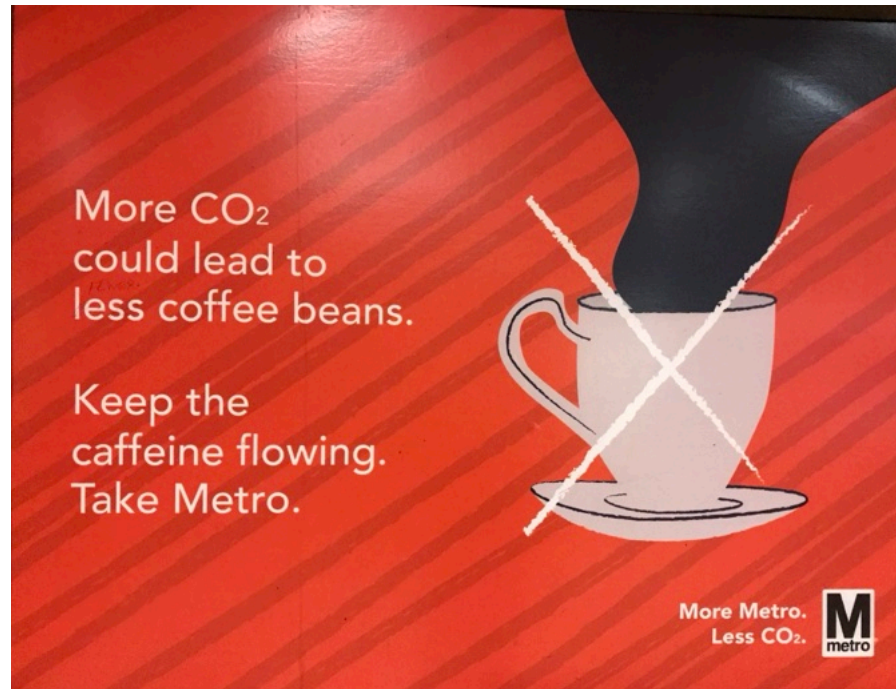
Framing with collective solutions

- Think of a little-picture, individual-level “solution” to your health equity issue that advocates often mention.
- On the Jamboard, jot down a quick idea about a big-picture, collective solution you could substitute as a go-to example.
- Example:
Get 150 minutes of activity/week—→
Design communities to encourage walking, biking, playing

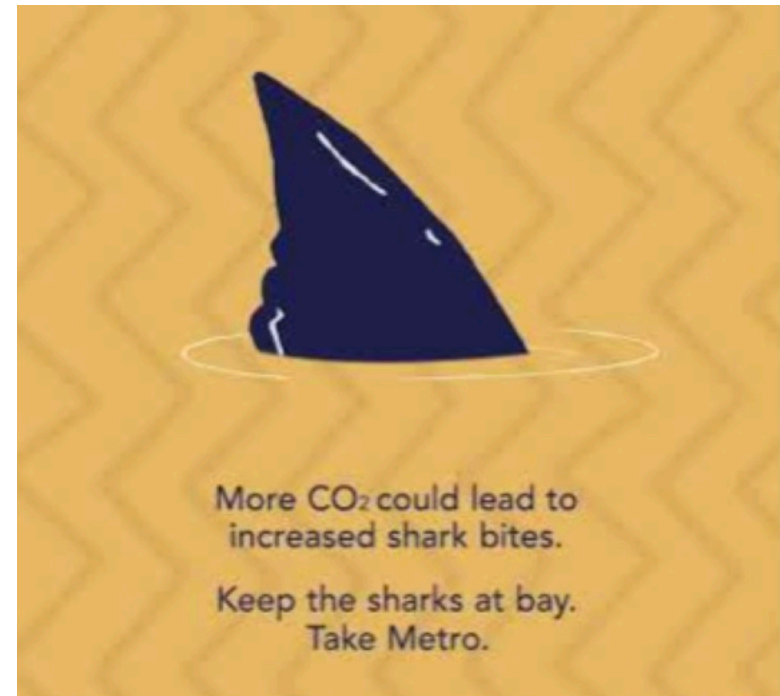


Reframing strategy #5

Emphasize explanation.



Without
explanation
How does that work?



Assertion

Experiences between birth and age 5 matter significantly to children's long-term emotional and psychological health.

Explanation

Early experiences (0-5) wire the brain's circuits for emotions and thinking, shaping long-term psychological health.

Which one is *actually explaining*?

A

Because wages have been stagnant while housing prices have increased, today's minimum wage isn't enough to rent an average one-bedroom apartment anywhere in the US.

B

"Rent burden" is defined as spending 30 percent or more of pre-tax income on housing. In 2015, at least 28% of Americans were rent-burdened, compared with 21% in 2001.

Which one is *actually explaining*?



A

Because wages have been stagnant while housing prices have increased, today's minimum wage isn't enough to rent an average one-bedroom apartment anywhere in the US.

B

"Rent burden" is defined as spending 30 percent or more of pre-tax income on housing. In 2015, at least 28% of Americans were rent-burdened, compared with 21% in 2001.

Which one is *actually explaining*?

A

Black patients are less likely to seek medical care for chronic health conditions.

B

The experience of discrimination can make Black people reluctant to seek medical care.

Which one is *actually explaining*?

A

Black patients are less likely to seek medical care for chronic health conditions.



B

The experience of discrimination can make Black people reluctant to seek medical care.

Which one is *actually explaining*?

A

The stress of social isolation helps to explain why LGBTQIA+ youth are twice as likely to try smoking before age 13.

B

Youth who identify as LGBTQIA+ are twice as likely than their straight peers to try smoking before the age of 13.

Which one is *actually explaining*?



A

The stress of social isolation helps to explain why LGBTQIA+ youth are twice as likely to try smoking before age 13.

B

Youth who identify as LGBTQIA+ are twice as likely than their straight peers to try smoking before the age of 13.

Explanatory chains show what affects what

- Strong explanatory chains:
 - Clearly lay out **cause-and-effect** sequences
 - Have a **tight logical flow** - one idea leads to the next
 - Include many **causal transitions**, guiding understanding of what affects what (*this helps to explain why, this is one reason why*)
 - **Can double the level of support** for good policy, when compared with mere description



A strong chain is built from links, and could connect to a solution



Background >> mechanism(s) >> outcome



Obesity >> heart disease



Food environment >> obesity >> heart disease



Unfair policy >> food environment >> obesity + stress >> heart disease

Missing Explanation = Misplaced Responsibility



Include a Causal Pathway

It Just Is

“Disparities exist among populations.”

“Leisure time physical activity is lower among people with lower incomes.”

Missing actor / passive voice

“Residential segregation has resulted in communities with fewer physical characteristics conducive to maintaining a physically active lifestyle.”

- Some of us have access to the building blocks of wellbeing - others don't
- Some of us are protected from harmful experiences - others aren't
- Discrimination & poverty increase stress, and trigger longer-term health problems, with cascading consequences
- Unjust and unfair practices have caused harm and continue today
- Implicit bias & biased practices built into systems shape experiences of some groups

Stress can increase commercial tobacco use, and can make health problems worse

Stress, such as that caused by financial problems, discrimination, or unsafe neighborhoods, can make someone more likely to smoke.^{34,35,36} Some A/NH/PI people face many types of stress:

- Asian people who reported many instances of discrimination were more likely to smoke than Asian people who reported fewer instances of discrimination.³⁷
- Compared to other racial/ethnic groups, Native Hawaiians are more likely to have low-paying jobs and to have below average living conditions. Many report high levels of racism and discrimination, and that it affects their jobs, housing, and income.³⁸
- Southeast Asian ethnic groups have lower incomes than the average U.S. household income, according to the Southeast Asia Resource Action Center.³⁹ Continuing financial problems are a major source of stress.

When people experience severe or long-lasting forms of stress, their bodies respond by raising stress hormones and keeping them raised. When this goes on for a long time, they may develop health problems like high blood pressure and diabetes.^{40,41} Smoking cigarettes also leads to disease and disability and harms nearly every organ of the body.⁸



Which 'starter explanation' works well for your topic?

- How could you build from one of these starter explanations to be more specific to your health equity topic?
- You can add your idea to the chat or raise your digital hand to come off mute and share it verbally.

- Some of us have access to the building blocks of wellbeing - others don't
- Some of us are protected from harmful experiences - others aren't
- Discrimination & poverty increase stress, and trigger longer-term health problems, with cascading consequences
- Unjust and unfair practices have caused harm and continue today
- Implicit bias & biased practices built into systems shape experiences of some groups

Explanations need not be lengthy

Millions
are exposed
to secondhand smoke

and some can't do
anything
about it.



Even if you don't smoke, you can still be exposed to secondhand smoke in your home through vents, doors, and windows.
Talk to your landlord about making your building entirely smoke-free.

**Explanations
don't have to
sound like
lectures**



Explanation centers this narrative

1. Principle

Justice/ Fairness.

All people should have a full, fair, and just opportunity to be as healthy as possible.

2. Process

Chronic Disease

When people develop chronic diseases, it undermines health and wellbeing. We have proven ways to prevent most chronic conditions.

3. Problem

Uneven Prevention

While many of us benefit from policies that help to prevent disease, they often don't cover places where marginalized groups live, learn, work, or age.

4. Proposal

Ensure prevention everywhere

We can devote more resources to communities experiencing most harm

We can address root causes

Reframing strategy #6

Lead with the aspiration, not the issue.

Over-emphasizing the problem doesn't work

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**“Is this situation perfect? No. Is it what we expected? Certainly not.
Can we do anything about it? Nope.
Am I getting more and more depressed as I talk about it?
You bet.”**

Lead with an appropriate ‘flavor of fairness’



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



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



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

Leading with a value leads people toward your proposal

1. Principle

Justice/ Fairness.

All people should have a full, fair, and just opportunity to be as healthy as possible.

2. Process

Injuries Matter

When people get hurt, it undermines health and wellbeing. We have proven ways to keep people safer.

3. Problem

Prevention Gaps

While many of us can take protections for granted, they often don't cover places where marginalized groups live, learn, work, or age.

4. Proposal

Close the gaps

We can devote more resources to communities experiencing most harm

We can address root causes



Intimate partner violence (IPV) is a serious preventable public health problem that affects millions of Americans and occurs across the lifespan.

IPV is highly prevalent. IPV affects millions of people in the United States each year.

The burden of IPV is not shared equally across all groups; many racial/ethnic and sexual minority groups are disproportionately affected by IPV.

Source: Intimate Partner Violence Prevention Resource for Action (2017)



Examples of framing with fairness



Everyone should be able to live, learn, and love without the risk of being harmed physically or psychologically by an intimate partner such as a spouse, boyfriend/girlfriend, or sexual partner.



Our commitment to ensuring that everyone is as healthy as possible calls us to do more to prevent and address intimate partner violence, which undermines the wellbeing of millions of Americans each year.



When we see that a particular social group is exposed to a type of harm at higher levels than others, it's a matter of basic fairness to figure out why and what we can do about it. When it comes to intimate partner violence, we must work closely with young people, people with disabilities, people who are LGBT+, and people ending a relationship. Taking different approaches with different groups is vital to ensuring health and safety.

Asian, Native Hawaiian and Pacific Islander People and Commercial Tobacco: Health Disparities and Ways to Advance Health Equity

[Print](#)

Everyone deserves a fair and just opportunity to be as healthy as possible. This is called *health equity*. Achieving health equity means addressing system-wide problems, unfair practices, and unjust conditions that have a negative impact on the health of specific groups. In order to achieve health equity, we work to eliminate health disparities. Health disparities are differences in health outcomes that are closely linked with social, economic, and/or environmental factors.

To improve health equity for Asian, Native Hawaiian and Pacific Islander (A/NH/PI*) people we must consider the role of *commercial tobacco**.



Health Burden From Commercial Tobacco

How Asian, Native Hawaiian, and Pacific Islander people experience a health burden from commercial tobacco

Framing with collective solutions

- Think of a little-picture, individual-level “solution” to your health equity issue that advocates often mention.
- On the Jamboard, jot down a quick idea about a big-picture, collective solution you could substitute as a go-to example.
- Example:
Get 150 minutes of activity/week—→
Design communities to encourage walking, biking, playing



Recap of reframing strategies

Navigate existing narratives.

Attribute responsibility carefully.

Frame toward collective solutions.

Emphasize explanation.

Lead with the aspiration, not the problem.

FrameWorks has research you can access on numerous health topics

Child and youth health

- ACEs/childhood adversity
- Adolescent development
- Child abuse and neglect
- Child development
- Child mental health
- Immunization
- Maternal & infant health
- Parenting

Social Determinants of Health

- Built environment
- Food/nutrition/obesity
- Geographic health drivers
- Housing
- Connectedness
- Racism as public health threat

Chronic Disease Topics

- Aging
- Alcohol policy issues
- Oral health
- Substance use prevention
- Tobacco-related health disparities

Injury & Violence Topics

- Child abuse & neglect
- Gun violence prevention
- Elder abuse

Cross-cutting

- Value of public health
- Climate change & health
- Health equity

Health Care/Health Systems

- Patient Safety
- Public health informatics
- Systems of care

Reactions? Questions?

Thank you!

Let's continue the conversation.

jsweetland@frameworksinstitute.org



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The FrameWorks Institute is a nonprofit think tank that advances the mission-driven sector's capacity to frame the public discourse about social and scientific issues. The organization's signature approach, Strategic Frame Analysis[®], offers empirical guidance on what to say, how to say it, and what to leave unsaid. FrameWorks designs, conducts, and publishes multi-method, multidisciplinary framing research to prepare experts and advocates to expand their constituencies, to build public will, and to further public understanding. To make sure this research drives social change, FrameWorks supports partners in reframing, through strategic consultation, campaign design, FrameChecks[®], toolkits, online courses, and in-depth learning engagements known as FrameLabs. In 2015, FrameWorks was named one of nine organizations worldwide to receive the MacArthur Award for Creative and Effective Institutions.

Learn more at www.frameworksinstitute.org