



## **A FrameWorks Institute Ezine Childhood Obesity**

A sample of recent headlines from just one day in March of 2007 exemplifies the framing challenges implicit in the topic of childhood obesity:

- “Healthy Habits Combat Childhood Obesity”
- “A Complicit Casualty of the Obesity Epidemic”
- “Parents Told to Take Front Line on Childhood Obesity”
- “Parents Blamed for Child’s Obesity ‘time bomb’ “
- “Obesity Warrior to Speak at Ithaca College”
- “State Launches Program to Battle Childhood Obesity”

The problem of childhood obesity has captured the public’s attention, driven both by the public health facts about a rapidly rising childhood obesity rate, and by sensational stories of massively overweight children (such as the 218 lb. English eight-year-old.) But getting your issue in the news is not sufficient to guarantee it a place on the public agenda; HOW the public understands your issue is critical to its acceptance as a target for public policy. The goal of this E-Zine is to look at what common messages about childhood obesity are really telling the public, reveal what is obscured by these messages, and share a powerful communications strategy – *causal sequences* – that advocates can use to change the conversation about childhood obesity.

### **Problems With the Dominant Communications Approach to Childhood Obesity**

1. *It focuses on the individual as the cause of the problem.*

FrameWorks’ research<sup>1</sup> shows that *health individualism* is a dominant model in people’s minds when they think about food and fitness. The public believes that it is an individuals’ personal responsibility to make healthy or unhealthy choices, and these choices only impact the individual and his or her immediate family. In other words, it’s up to *you* to be healthy, and, if you’re not, *you* may suffer the consequences. When the model of health individualism is applied to problems like childhood obesity, it directs the focus completely onto the individual overweight child.

A recent story from the popular media exemplifies this focus on children and their choices as the problem:

“Today's kids are generally getting less exercise, experts say, because they're choosing TV time and video games over bike rides and tag games. Teenagers who don't excel at sports are at risk of becoming sedentary even before they reach adulthood. But with a little push, those same kids could be taught to put exercise into each day.” From “Come Out and Play”, *The Richmond Times-Dispatch*, March 7, 2007.

## 2. *Parents are the only responsible actors in the frame.*

As with many other topics involving children, the childhood obesity discussion falls victim to the “family bubble” trap. The public tends to view children as the sole responsibility of their parents with little room for the influence of the child’s environment and community. When parents are seen as completely responsible for their children’s weight, it makes it difficult to discuss the role of schools, communities and policy makers in addressing childhood obesity.

Here’s a typical example from a magazine aimed at teenage girls that puts the responsibility for healthy eating on mothers:

“Says Monique, 12, ‘My mom is heavy, but she buys fatty food all the time, and then tells me to watch what I eat! We have no healthy food in the house. How does she expect me to be healthy?!’ If your mom is like Monique’s try talking to her about making better food-shopping choices.” From “Special Report: weighing in,” *Girl’s Life*, June-July 2006.

## 3. *The problem is overwhelming.*

The language of war and battle, while powerful, can lead to the view that childhood obesity is an overwhelming and hopeless problem. Any potential solution would have to be very powerful to “win the war” and most policy recommendations seem ineffective and “too little too late.” As Ronald Reagan once said about the War on Poverty, “we had a war on poverty and poverty won.” There is no room in this metaphorical construct to discuss incremental change, building a policy consensus, or developing community will. Like the Crisis Frame, the War Frame is also over-used and tends to create its own competition: is winning the war against obesity as important as, say, winning the war against terrorism, or even the war against breast cancer, or the war against hunger?

Here’s a typical example of this language from our neighbors to the north:

“Battle with Blubber: The epidemic of childhood obesity in Canada needs an Olympic effort to reverse the catastrophic trend suggesting today's kids won't live as long as their parents, a House of Commons committee says.” *Edmonton Sun*, March 28, 2007.

*4. Behavior change by parents and children is the solution to the problem.*

If children and their bad habits and food choices are the cause of childhood obesity, then the obvious solution to the problem is changing the personal behavior of the child and/or the parents. Increasingly, public health experts have identified a range of public policies focused on improving nutrition and increasing physical activity that could impact the overall level of obesity among American children. These include restricting marketing of low-nutrition foods to children, improving school food programs, increasing resources for nutrition and physical activity programs, expanding physical activity options in the community environment (walking paths, parks, walk to school programs, increased physical education requirements in school), and requiring nutrition labeling in restaurants.

However, when child obesity is attributed to children's bad eating habits, lack of exercise or poor parenting, it is difficult to get people to think about food and nutrition policy change because they are focused again on the individual child and family. These other actors (the built environment, food marketers, policy makers, schools) are not in the frame. This results in a "frame clash" where advocates' solutions and the public's understanding don't meet.

### **The Role of Food Environments and Physical Environments**

Along with these mistakes misdirecting our thinking, current language about childhood obesity also obscures many important factors. These include the role of the food environment, and the role of the physical environment.

Research by FrameWorks for the W.K. Kellogg Foundation found that the environment in which food is grown, processed, marketed, sold and consumed is invisible to most Americans. Media coverage of food issues is dominated by consumer thinking. Reasoning within this frame, the only role for government is to set rules and get out of the way, allowing the market to respond to consumer choice. As FrameWorks concludes from a review of newspaper reporting about food:

*"A strong focus on consumers and a consumer-perspective obscures the real dynamics of food systems. When pieces are not focusing on farmers, they are often focusing on food from a consumer perspective that is unhelpful in a number of ways – in particular, the pieces support the illusion that consumer choice is the driving force that shapes the food system, and obscure all other causal forces...This model obviously obscures the role of the many other actors who actually wield much more direct and deliberate control over the food systems – including the decision-makers at firms that produce, market and distribute food."*<sup>2</sup>

The role of the physical environment in which children live also disappears in most conversations about childhood obesity. Once again, FrameWorks research shows that Americans are missing the link between the environment and health and fitness. There is

little understanding that health is affected by various aspects of physical, social, economic and cultural environments and that individual health is largely a product of the systems (natural, social infrastructure, etc.) that surround us.

Even when the surrounding culture and its effects on nutrition and physical health are made clear, there is a strong tendency for the dominant frame of Choice to take over, as best exemplified in a recent column commenting on the documented effects of food advertising to children. The column starts strong:

“Parents who stock their kitchens with healthy food, limit eating out and ensure that their children stay active may overlook a threat to their best efforts to keep their kids lean: the television. As a new report from the Kaiser Family Foundation showed last week, children and teens get bombarded with thousands of food ads yearly...that might not be a problem if the ads promoted nutritious fare, such as fruit, vegetables, whole grains and low-fat dairy products. But the report...highlights how TV commercials tout mostly junk food.”

But, by the end of the column, the Choice Frame reasserts itself. With no clear solution about how to get the TV under parental control, or introduce policies and programs that would change the child’s food and fitness environment, individual responsibility becomes the only solution:

“So if you and your kids snack while watching television, reach for fruit, carrot sticks, bean dip, salsa and other healthier fare. And while you’re at it, try to get off the couch at least during the commercials. Or consider putting some exercise equipment in the family room near the television.” – From “Full Up to Here With Commercials.” *Washington Post*, April 7, 2007.

Knowing what we now know about how Obesity is framed in news media, and how these frames are likely to affect public understanding, what can advocates do to get more Conditions and Environments in the frame to balance the strong default of Choice and Individualism?

### **Using Causal Sequences to Include Environment in the Conversation**

One way to get more Big Picture Thinking into this topic is to use causal sequences.

An effective causal sequence is a clear and concrete explanation of the causes of a problem, including the mechanism by which the problem is created. Causal sequences contain the following three parts: an initial factor, a final consequence, and a “middle term” which provides the explanation that links the two. Effective causal sequences should be expressed as a brief, powerful statement about causation so that the reader strongly feels the connection between the parts.

Causal sequences are a communications tool to help people easily understand the connections between different *facts* about obesity, such as the increase in the number of overweight kids and the decrease in school physical education requirements; the *interdependence* of different players in solving the problem, such as schools, families, the community, and food manufacturers; and the *history* of an issue, such as changes in community structure and transportation methods that contribute to inactivity.<sup>5</sup>

Here are some ways that advocates could use causal sequences to insert environment into the childhood obesity stories being told in the media.

*Example #1:*

“Today's kids are generally getting less exercise, experts say, because they're choosing TV time and video games over bike rides and tag games. Teenagers who don't excel at sports are at risk of becoming sedentary even before they reach adulthood. But with a little push, those same kids could be taught to put exercise into each day.” From “Come Out and Play”, *The Richmond Times-Dispatch*, March 7, 2007.

Here it is with a causal sequence:

“Today's kids are generally getting less exercise (initial factor), as schools decrease the amount of phy ed and recess time offered each week (middle term), increasing their risk of becoming sedentary adults (final consequence).”

*Example #2:*

“Says Monique, 12, ‘My mom is heavy, but she buys fatty food all the time, and then tells me to watch what I eat! We have no healthy food in the house. How does she expect me to be healthy?!’ If your mom is like Monique’s try talking to her about making better food-shopping choices.” From “Special Report: weighing in,” *Girl’s Life*, June-July 2006.

With a causal sequence:

“...When parents don’t have access to healthy food (initial factor) because they live in a neighborhood where access to fresh produce and other healthy foods is limited, (middle term) this makes it almost impossible to offer healthy diets at home (final consequence). Initiatives such as community gardens can help make healthy food available to everyone.”

OR

“...When unhealthy foods like high fructose corn syrup benefit from generous Farm Bill subsidies (initial factors) which makes them much cheaper than healthy foods and fresh produce (middle term), this makes it difficult for many families to afford to eat better.”

*Example #3:*

“Parents who stock their kitchens with healthy food, limit eating out and ensure that their children stay active may overlook a threat to their best efforts to keep their kids lean: the television. As a new report from the Kaiser Family Foundation showed last week, children and teens get bombarded with thousands of food ads yearly...that might not be a problem if the ads promoted nutritious fare, such as fruit, vegetables, whole grains and low-fat dairy products. But the report...highlights how TV commercials tout mostly junk food...So if you and your kids snack while watching television, reach for fruit, carrot sticks, bean dip, salsa and other healthier fare. And while you’re at it, try to get off the couch at least during the commercials. Or consider putting some exercise equipment in the family room near the television.” – From “Full Up to Here With Commercials.” *Washington Post*, April 7, 2007.

With a causal sequence:

“The constant barrage of junk food ads directed at children (initial factor) shapes their food preferences, (middle term) leading to an increase in consumption of unhealthy snacks, especially while watching television (final consequence).”

Remember: You can write causal sequences to improve communications about many different aspects of childhood obesity. Causal sequences work, and they work especially well when people are struggling to connect conditions to human actions. They are a simple and extremely effective tool that can offer the public a richer and deeper understanding of how changing the food and physical environments can help solve the problem of childhood obesity.

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***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](http://www.frameworksinstitute.org).

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<sup>1</sup> See FrameWorks' research on Community Health at

<http://www.frameworksinstitute.org/clients/commhealth.shtml>

<sup>2</sup> See "Harmful and Productive Patterns in Newspaper Representations of Food Systems," A. Aubrun, A. Brown and J. Grady for the FrameWorks Institute, August 2005.

<sup>3</sup> For a more in-depth look at causal sequences, see FrameWorks E-Zine number 31, "Strengthening Advocacy By Explaining "Causal Sequences".