

Invited Commentary

Framing analysis: its usefulness as a tool for advocacy on public health nutrition problems

Public health nutrition remains a place where empirical work about natural phenomena (e.g., nutrients) co-exists with studies interrogating how meaning is constructed. Framing is a process by which people orient their thinking about a problem⁽¹⁾, and framing analysis is the study of how people's ideas might be influenced, which is a key function of advocacy. Framing analysis could thus be helpful to public health nutrition professionals seeking to mitigate health problems. The purpose of this commentary is first, to introduce public health nutrition specialists to framing analysis - its origins, theory and methods, and second, to consider its usefulness as a tool for advocacy on public health nutrition problems.

Framing analysis

Allen's definition of frame (or framing) analysis is a theoretical, methodological and critical tool for exploring processes of meaning making and influence among governmental and social elites, news media and the public⁽²⁾. Framing analysis comes from the social sciences, particularly political science, communication/media studies and sociology; the origins of framing are attributed to sociologist Goffman in 1974⁽³⁾. Goffman's work produced two somewhat distinct threads of inquiry: the cognitive and the social-relational. Public health nutrition retains these threads in its work today with cognition studies attentive to how eating behaviours are learned and postmodernist research revealing how the social construction of meaning around food is influenced by contexts in the social environment.

Two successive generations of framing theorists have sharpened framing analysis and its application in the public policy realm, notably Americans Martin Rein and Donald Schön for their introduction of frame-critical policy analysis⁽⁴⁾ and European scholars DeWulf et al.⁽⁵⁾ and Merlijn van Hulst and Dvora Yanow⁽⁶⁾ who represent broadening perspectives on how framing can be more actionable through greater attention to its socio-relational aspects. At the heart of the latter's critique is that there are still two threads of inquiry; on the one hand, there are 'frames' (the noun, known through coding/measurement) and on the other, 'framing' (the verb, known through critical analysis) which represents the 'work done' in social situations by the frames.

Framing analysis has many theoretical and methodological companions under the overarching domain of discourse analysis in which it resides - rhetoric (e.g., arguments); narratives (e.g., those organised as causal stories⁽⁷⁾) and interpretive policy analysis⁽⁸⁾ to name a few. The public health nutrition researcher entering the field of framing will need to read and navigate a broad and nuanced literature and once settled on framing analysis choose their theoretical starting point and clarify their study's intentions and epistemology.

A model template of framing analysis

The 'childhood obesity problem' is one of interest to public health nutrition specialists who seek better tools to advance healthy public policy to mitigate its harms. To this end, Russell and colleagues offer a concrete and effective application of framing analysis in their paper, 'The political construction of public health nutrition problems: a framing analysis of parliamentary debates on junk-food advertising to children in Australia⁽⁹⁾. Their study applies framing theory and methods to examine healthy public policy through legislative debate on the topic of food and beverage advertising prohibitions directed at children.

Their findings show that political parties share a common understanding of the harms of childhood obesity, and thus the harm message should be incorporated into advocacy activities. However, they also identify constraints to persuasive messaging because parliamentarians' framing of the issue of junk-food advertising to children varies by party values and ideology regarding childhood obesity (i.e., an individual child/parental supervision problem v. a food environment problem), and whether they are in government or opposition⁽⁹⁾. This is despite a strong evidencebased literature implicating such advertising as at least partially causal of increased childhood obesity.

Russell et al.'s framing analysis is based on a strong theoretical framework, and methodology including extraction, coding and content analyses. The policy environment chosen by the authors is ideal as they are able to capture,





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through Hansards of the Australian House of Representatives and Senate, the near-verbatim statements of the highest governmental elite, namely elected members of parliament. Beginning with the broad topic of obesity, their search for extracts yields a substantive, and highly contested, policy topic – junk-food advertising to children. This is fertile ground for framing work. Their theoretically informed approach is broadly constructivist which is pertinent to social discourses, and their coding framework deliberately acknowledges the political ideologies of three dominant political parties (right-leaning, centrist and left-leaning).

Russell *et al.* add a psychological dimension to their framing analysis applying the work of Chong and Druckman⁽¹⁾. This is apt among politicians conversing within a multi-party political system, where attitudes and ideologies underpin both what and how meaning is conveyed. The authors' coding framework matrix is completed by an analysis of the articulation of a policy problem that is at once generic but also borrows heavily from Kingdon's theory of agenda-setting⁽¹⁰⁾: What is the problem?, Who is responsible? and What needs to be done? To the former question, they then seek the causal story⁽⁷⁾ by specifically asking: What/who is identified as the main cause of the problem? and Is the cause described as systemic or individualistic? They also add a consideration of risk/harm to the policy problem rubric.

While Russell *et al.*'s paper does interrogate reasons for political inertia on restrictions on junk-food advertising to children, it could have gone further by providing a practical demonstration of the use of their framing analysis as a tool for political action on the issue. From their findings, Russell and colleagues emphasise the consensus view that childhood obesity is harmful as a starting point for public health nutrition advocates wishing to frame their own messages. Rather than go further, they conclude with a hopeful message to the health advocate that if one could just get the frame 'right,' policy makers would be more likely to respond to this policy problem⁽⁹⁾.

Using frames or framing for action

In another Australian framing study published in this journal, in this instance related to nutrition and trade policy, Baker *et al.* conclude with a similar refrain: 'Framing the inter-linkages between trade and nutrition in simplistic, easy-to-understand messages may be imperative to raising the profile of the issue with public and political audiences' (11). Reviewers were satisfied when we offered a similar exhortation after extensive framing analysis work using federal and provincial Hansards on the public health nutrition problem of household food insecurity (HFI) involving Canadian parliamentarians between 1995 and 2012:

In the case of HFI policy advocacy in Canada, government interventions to address HFI by improving

access to income appear to have a place in the political rhetoric across the political spectrum. Advocates might, however, consider whether or not an attention to the lack of access to food is the best lens to employ to argue for policies that address the deep poverty that characterizes HFI. Interventions that can be easily interpreted by centrist or rightist governing parties as supporting the better working of the market, reducing taxation and supporting the dignity of working people by allowing them to make their own decisions about income and food, for example, would be important to promote^(12, p. 878).

However, after publishing a series of framing studies of HFI in Canada to discern how the problem is understood and solutions posited⁽¹³⁾, what legislation has been tabled in the name of HFI⁽¹⁴⁾, why the problem has become intractable⁽¹⁵⁾, the role of political rhetoric⁽¹²⁾ and valence of the idea of HFI⁽¹⁶⁾, we are now more circumspect that one can actively (i.e., cognitively) reframe the issue for policy change^(5,16). Russell *et al.* also add the caveat that further research is needed to develop framing strategies, calling for participatory and action-oriented research with advocates themselves⁽⁹⁾.

Framing analysis for public health nutrition problems is needed to move beyond the creation of crude stereotypes of proponents' and opponents' views and the development of trite social marketing slogans. However, it appears from the papers of Russell *et al.*⁽⁹⁾, Baker *et al.*⁽¹¹⁾ and our own earlier work that as health scholars we tend more to the 'frames' than the 'framing'. When we ask public health 'to frame' (verb), it means 'using better frames' (noun). This may be because using framing to target the socio-relational conditions within which frames do their work is a bit ethereal for public health practice. To 'actively reframe' implies having agency within social structures, and in practical terms a requirement to engage meaningfully in the policy process.

So while framing analysis is a tool that can absolutely be used to inform more thoughtful frames, public health nutrition specialists also need to put those frames to work in arenas capable of generating action. Fortunately, there are many schools of thought on how public health advocates might engage in the policy process; Sabatier's advocacy coalition framework, as one example, is enduring (17), as is the role of the policy entrepreneur (10). Russell *et al.* (9) also utilise rich bibliographic references related to framing analysis and theories of the policy process to inform their study search and analytic strategies but, of consequence, these resources are less used in their discussion and conclusions. What remains untested is how frames can be used to work as tools for advocacy within policy processes.

If framing analysis is coming of age as a theoretical, methodological and critical tool with which public health nutrition problems can be explored, and presumably addressed, then the emphasis must be on using the tool for action. Hopefully, the next generation of papers will be population health intervention or critical case studies

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demonstrating where the 'work done' in social situations by reworked frames has been used in successful efforts at policy change.

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