

00:01:06.270 --> 00:01:11.640

Jeff Bornstein: Welcome to framing health equity communication strategies that work.

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00:01:12.840 --> 00:01:19.470

Jeff Bornstein: My name is Jeff bornstein and i'll be running this dialogue for health web form with my colleague Murlean Tucker.

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00:01:21.090 --> 00:01:28.860

Jeff Bornstein: Thank you to our partners for today's event the frameworks Institute and the Center for health leadership in practice.

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00:01:30.930 --> 00:01:41.520

Jeff Bornstein: except for those scheduled to speak, all other microphones have been muted to reduce background noise, you can listen to the audio through your computer speakers or connected headphones.

7

00:01:42.300 --> 00:01:51.360

Jeff Bornstein: We encourage you to share your thoughts and questions about today's event by typing them in the Q amp a box and we'll answer as many as time allows.

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00:01:52.020 --> 00:02:01.530

Jeff Bornstein: click on the Q amp a box located on the zoom control bar at the bottom of your screen the Q amp a panel will appear and type your question and click send.

9

00:02:02.490 --> 00:02:11.700

Jeff Bornstein: Closed caption is also available just click on the live transcript button on the zoom control bar and select the option to view captioning.

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00:02:14.100 --> 00:02:24.030

Jeff Bornstein: Now it is time to meet the Moderator of today's event Dr Carmen return of our as Dr Navarro is is the public health institute's senior Vice President.

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00:02:24.510 --> 00:02:34.530

Jeff Bornstein: of external relations and preventative medicine, the Director of the Center for health leadership in practice and the director of dialogue for health for the Public Health Institute.

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00:02:35.370 --> 00:02:43.740

Jeff Bornstein: She is also the director of the California overdose prevention network and the national overdose prevention network welcome Carmen.

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00:02:47.790 --> 00:02:55.290

Carmen Nevarez: Thank you Jeff it's really very exciting to hold this meeting today with all of you, thank you for joining us.

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00:02:56.220 --> 00:03:07.470

Carmen Nevarez: First of all, this is an area that has a high degree of interest we got over 1200 registrations to have this conversation today, so we know this is really important for all of you.

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00:03:07.800 --> 00:03:25.170

Carmen Nevarez: We frequently hear from teams that we work with across the country that communicating our message continues to be a challenge, and this is particularly important when we try to generate meaningful conversation around health equity.

16

00:03:26.370 --> 00:03:33.630

Carmen Nevarez: So today we've invited Julia suitland from frameworks Institute to help us think about what we're saying differently.

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00:03:34.650 --> 00:03:40.710

Carmen Nevarez: What we are saying differently and how to build conversations that really work around this issue.

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00:03:41.970 --> 00:03:55.290

Carmen Nevarez: So, Dr Julius wheatland is associate linguistic linguist and a senior advisor at frameworks institute a think tank that equips mission driven communicators to lead productive public conversations.

19

00:03:58.560 --> 00:04:08.640

Carmen Nevarez: frameworks, a unique approach to applied communications research shapes public discourse across the nation and around the world and their impact has been recognized in.

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00:04:10.170 --> 00:04:16.770

Carmen Nevarez: With the MacArthur Award for creative and effective institutions, otherwise known as the organizational genius grant.

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00:04:19.680 --> 00:04:29.430

Carmen Nevarez: It is our true true pleasure to invite Julia to Mike and asked her to go ahead and take over this conversation and get us rolling on this.

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00:04:30.750 --> 00:04:41.730

Julie Sweetland | FrameWorks (she/her): Right, thank you, Carmen and thanks to all of you for joining today, let me just take a moment here and pull up my slides I am so.

23

00:04:42.330 --> 00:04:54.150

Julie Sweetland | FrameWorks (she/her): excited to delighted to have the chance to contribute to your thinking of an important work on public health and health equity, from the perspective of social science and the science of communications.

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00:04:57.180 --> 00:05:03.360

Julie Sweetland | FrameWorks (she/her): will go through today is i'll take just a moment to introduce frameworks and the idea of framing in general.

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00:05:03.690 --> 00:05:12.240

Julie Sweetland | FrameWorks (she/her): I will spend most of the time really taking a tour of some of the findings from that we have here at the frameworks Institute, starting with an investigation.

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00:05:12.510 --> 00:05:22.980

Julie Sweetland | FrameWorks (she/her): or outline of some of the mental models of health and disparities that make these conversations difficult to navigate and then for practical strategies for shifting mindsets toward health equity.

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00:05:23.700 --> 00:05:36.420

Julie Sweetland | FrameWorks (she/her): we'll have plenty of time we'll pause often throughout here for questions and discussion for your thoughts and experiences with these strategies and then we will have a big dance routine at the end big finish.

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00:05:37.140 --> 00:05:48.570

Julie Sweetland | FrameWorks (she/her): Alright, so today I will be sharing insights from a range of research that my colleagues and I have conducted at the frameworks institute we're nonprofit or based in DC work nationally and internationally.

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00:05:48.960 --> 00:06:01.800

Julie Sweetland | FrameWorks (she/her): We guide and support other nonprofits to lead productive public conversations we're a group of social scientists so it's Carmen mentioned i'm a linguist by colleagues who are in apologist sociologists psychologists and so forth.

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00:06:02.340 --> 00:06:15.030

Julie Sweetland | FrameWorks (she/her): This is not your typical arrangement for communication shop, but we use our various disciplinary perspectives and methods to investigate the communications aspects of social and scientific issues.

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00:06:15.750 --> 00:06:25.260

Julie Sweetland | FrameWorks (she/her): We all work here, because we believe that framing can drive meaningful change, but to get that to get the right change, you need the right frame and that takes the right research.

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00:06:26.520 --> 00:06:34.200

Julie Sweetland | FrameWorks (she/her): So research that while pull on today is from work on a range of issues that we do work on lots of topics were especially known.

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00:06:34.470 --> 00:06:40.740

Julie Sweetland | FrameWorks (she/her): For our work in early childhood, for instance, we are the originators of the phrase toxic stress, if you happen to have heard that.

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00:06:41.280 --> 00:06:50.820

Julie Sweetland | FrameWorks (she/her): We do quite a bit of work in public health today i'll be highlighting lots of examples my recent research and to how to best elevate the issue of tobacco related health disparities.

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00:06:51.180 --> 00:07:02.310

Julie Sweetland | FrameWorks (she/her): But i'll also be bringing in examples from studies we've conducted on other health equity issues

like oral health versus equity ageism housing and health and environmental health.

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00:07:05.190 --> 00:07:13.320

Julie Sweetland | FrameWorks (she/her): So why we taken on these projects, because the way we talk about social issues, affects the kinds of change, we can create.

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00:07:14.070 --> 00:07:25.800

Julie Sweetland | FrameWorks (she/her): framing isn't, the only thing that drives change, but it is a necessary component and what is framing there are many choices that go into framing it's a set of choices.

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00:07:26.370 --> 00:07:34.980

Julie Sweetland | FrameWorks (she/her): making choices about how ideas are presented what we emphasize how we explain it what connections, we make, and which commitments are invoked.

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00:07:35.220 --> 00:07:43.950

Julie Sweetland | FrameWorks (she/her): And that involves the values that we lift up the names and the labels that we choose and often just as important as what we say, is what we don't say.

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00:07:44.400 --> 00:07:53.760

Julie Sweetland | FrameWorks (she/her): And these choices all matter because frames, are what people have called interpretive packages they shaped the way that people understand.

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00:07:54.210 --> 00:08:04.560

Julie Sweetland | FrameWorks (she/her): understand the issue their attitudes towards it, and their willingness to act or not act, and so, because those brains have effects it's important that we choose carefully.

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00:08:05.460 --> 00:08:13.320

Julie Sweetland | FrameWorks (she/her): And we at frameworks tried to go and help you go about the business of helping a land on which frames to choose.

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00:08:13.920 --> 00:08:22.740

Julie Sweetland | FrameWorks (she/her): Just as a nonprofit sector, we

have moved past the point where we select our program or policy strategies based on what we just think or feel would work or what we used to do.

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00:08:23.310 --> 00:08:32.580

Julie Sweetland | FrameWorks (she/her): We believe we need to move past that point when it comes to our communication strategies, we need to look to evidence and data, so let me give you an example that shows why.

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00:08:33.750 --> 00:08:45.480

Julie Sweetland | FrameWorks (she/her): So recently some some time ago, I guess, we a couple years ago we were asked to develop a national strategy to reduce pages attitudes and build support for age friendly friendly policies that would.

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00:08:45.780 --> 00:08:57.750

Julie Sweetland | FrameWorks (she/her): promote health equity across the lifespan so I researchers ran the experiment, the gate participants one of five terms for older people, older person older adults senior senior citizen and elderly.

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00:08:58.380 --> 00:09:12.570

Julie Sweetland | FrameWorks (she/her): And we asked them to rate the person that they imagined on a five point scale at scale was made up and adjectives like.at the idea of competence, they were things like technologically capable or free or independent or wise.

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00:09:13.110 --> 00:09:21.870

Julie Sweetland | FrameWorks (she/her): answers were average to create an overall measure of perceived competence and the resulting analysis came out like this.

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00:09:22.980 --> 00:09:37.410

Julie Sweetland | FrameWorks (she/her): So it revealed a clear continuum of competence associated with different labels and then participants also added in their own associations with the word so on the senior senior citizen end we got things like can't use a cell phone or grumpy or lonely.

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00:09:37.920 --> 00:09:50.520

Julie Sweetland | FrameWorks (she/her): So very other and outside of our Community these connotations won't help us drive policies designed

to foster equity and inclusion like accessible transportation or flexible workplace policies.

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00:09:50.970 --> 00:09:55.320

Julie Sweetland | FrameWorks (she/her): For older adults, we got things like independent and has it all together.

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00:09:55.680 --> 00:10:06.000

Julie Sweetland | FrameWorks (she/her): So that on its own would suggest that older adult is the best time to us because it's least likely to evoke paternalistic attitudes or stigmatizing attitudes.

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00:10:06.330 --> 00:10:19.920

Julie Sweetland | FrameWorks (she/her): But not so fast another part of the experiment gave people, one of these labels and ask them to indicate how old they thought person was responses from all the participants were average and the mean ages were as follows.

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00:10:21.060 --> 00:10:27.360

Julie Sweetland | FrameWorks (she/her): So a couple things you can see here could see that the competence continue on tracks exactly what the perceived age continuum.

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00:10:27.810 --> 00:10:33.900

Julie Sweetland | FrameWorks (she/her): The range for older, but the range for older adults really interesting some people said older adults were in their 30s.

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00:10:34.440 --> 00:10:44.610

Julie Sweetland | FrameWorks (she/her): Now that makes sense in some way reasoning being all younger adults in their 20s older adults that's 13 that everyone thought that, but it was definitely a theme and the responses.

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00:10:44.910 --> 00:10:51.960

Julie Sweetland | FrameWorks (she/her): So what older adults at that time was the current term preferred term among leading progressive voices in the aging field.

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00:10:52.230 --> 00:11:06.540

Julie Sweetland | FrameWorks (she/her): Our studies suggested when we say older adults, most people picture someone in their mid 50s or even

younger to get to health equity many policies that focus on people quite a bit older than that, so this name isn't our best friend, so our recommendation.

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00:11:07.290 --> 00:11:16.320

Julie Sweetland | FrameWorks (she/her): Is that people use as advocates you consistently use the term older people, you could also say older Americans are older, new Yorkers or what have you.

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00:11:16.680 --> 00:11:26.220

Julie Sweetland | FrameWorks (she/her): But this term evokes in the public mind people aged 16 over and at the same time, brings with it the most positively stigmatizing these paternalistic views.

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00:11:26.490 --> 00:11:31.890

Julie Sweetland | FrameWorks (she/her): Of the age group disguise described so framing is more than just naming.

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00:11:32.280 --> 00:11:38.910

Julie Sweetland | FrameWorks (she/her): But the terms that we use to refer to groups do have an impact on the policies we can move to advance equity for those groups.

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00:11:39.210 --> 00:11:44.940

Julie Sweetland | FrameWorks (she/her): So we need to look to evidence to find out how people are responding to what we call different social groups.

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00:11:45.360 --> 00:11:57.270

Julie Sweetland | FrameWorks (she/her): So this is a fairly simple example of framing and that it focuses on the effects of a single single word or single term when it comes to public health, we often need to think bigger the entire set of associations with an issue.

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00:11:58.230 --> 00:12:09.600

Julie Sweetland | FrameWorks (she/her): So, to give an example i'm sure you're all familiar with, and then not so distant past smoking was seen as helpful relaxing and even recommended as a way to lose weight and treat asthma, of all things.

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00:12:09.930 --> 00:12:22.170

Julie Sweetland | FrameWorks (she/her): Now, clearly, this has changed

our views of tobacco and smoking as a culture have shifted and in large part, our views change because public health advocates conscientiously reframe this issue.

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00:12:22.560 --> 00:12:29.760

Julie Sweetland | FrameWorks (she/her): The interpretive package that industry have given Americans was it smoking wasn't a problem, in fact, it was better understood as a pleasure.

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00:12:30.030 --> 00:12:38.430

Julie Sweetland | FrameWorks (she/her): And the savvy consumer was one who knew how to get the most pleasure, because they need to choose this particular brand over that particular brand or product.

69

00:12:38.880 --> 00:12:42.240

Julie Sweetland | FrameWorks (she/her): advocates intentionally diffused a different set of ideas.

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00:12:42.570 --> 00:12:51.090

Julie Sweetland | FrameWorks (she/her): The idea that cigarettes were defective and deadly product and that the tobacco industry is deceptive practices require government to step in and protect us.

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00:12:51.360 --> 00:13:04.410

Julie Sweetland | FrameWorks (she/her): With those ideas available people may different connections and evoked different commitments it wasn't up to consumers just pick the best product was up to citizens and governments to demand that we regulate thing a dangerous industry.

72

00:13:04.830 --> 00:13:10.890

Julie Sweetland | FrameWorks (she/her): So framing matters because it shapes what people will work on and the types of solutions that they will pursue.

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00:13:12.990 --> 00:13:22.830

Julie Sweetland | FrameWorks (she/her): And that another way framing shapes mindsets and mindsets and policies affect each other so tobacco control offers a perfect.

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00:13:23.250 --> 00:13:28.530

Julie Sweetland | FrameWorks (she/her): example of this dynamic, the initial wins on labeling policy and advertising.

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00:13:28.770 --> 00:13:38.250

Julie Sweetland | FrameWorks (she/her): helped fuel shifts and mindset around tobaccos harmful effects, so people were seeing Oh, this is harmful, and as that mindset that harmful product mindset consolidated.

76

00:13:38.580 --> 00:13:50.190

Julie Sweetland | FrameWorks (she/her): That contributed to further policy change like bands on smoking and certain public places first and closed phases than others, so, while this spiral is virtuous it didn't happen on on its own.

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00:13:50.730 --> 00:13:53.670

Julie Sweetland | FrameWorks (she/her): advocates had to make strategic decisions along the way.

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00:13:53.910 --> 00:14:04.950

Julie Sweetland | FrameWorks (she/her): Like emphasizing the dangers of secondhand smoke and the rights of non smokers, which further eroded the industry story that this is all that this issue is all about personal pleasure and individual indulgence.

79

00:14:05.310 --> 00:14:16.500

Julie Sweetland | FrameWorks (she/her): So that's why that's why framing matters of the way what people will do is determined at any moment, by the way they imagine the world and our framing shapes how people imagine the world.

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00:14:17.520 --> 00:14:19.230

Julie Sweetland | FrameWorks (she/her): For that so for that to make a difference.

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00:14:20.430 --> 00:14:30.750

Julie Sweetland | FrameWorks (she/her): We need to really understand what is it that people have in mind communications isn't a one way process that involves the people who are interacting with our messages.

82

00:14:31.080 --> 00:14:38.760

Julie Sweetland | FrameWorks (she/her): And so to make better choices about how we frame it helps to have a better sense of what guides

people's interpretations, it helps to have a map of public mindsets.

83

00:14:38.970 --> 00:14:50.340

Julie Sweetland | FrameWorks (she/her): So i'm gonna give you just a little tour of some of the ways Americans tend to think about what shapes health we have literally dozens of lengthy studies on this, but for purposes illustration i'm going to break it down into six.

84

00:14:50.640 --> 00:15:00.660

Julie Sweetland | FrameWorks (she/her): Six particular mental models so what are mental models before I go much further, they are deep assumed patterns of thinking.

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00:15:01.200 --> 00:15:04.350

Julie Sweetland | FrameWorks (she/her): They shape how we make sense of the world.

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00:15:04.710 --> 00:15:18.690

Julie Sweetland | FrameWorks (she/her): And they work function either to say what the status quo is okay or it's a problem right they normalize or problem, the ties aspects of the existing social order and so paying attention to these and being very precise about how these.

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00:15:19.320 --> 00:15:24.720

Julie Sweetland | FrameWorks (she/her): What they are and how they were is an important helps us be more strategic in our communications.

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00:15:26.010 --> 00:15:31.440

Julie Sweetland | FrameWorks (she/her): I can't leave a couple of short videos is about a minute and a half long and it is.

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00:15:32.040 --> 00:15:43.440

Julie Sweetland | FrameWorks (she/her): taken from on the streets interviews conducted on a couple of different of the health issues we've explored, these are from the before time, so you won't see masks all i'll give you an update shortly after this this is.

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00:15:46.170 --> 00:15:59.010

Julie Sweetland | FrameWorks (she/her): A sliver of data that we've collected it's been edited to kind of reflect the findings of our larger analysis and i'd like you to listen for what comes to mind with

the public is asked to think about what sheets health and how we can improve it.

91

00:16:03.060 --> 00:16:05.070

I kept thinking of health as.

92

00:16:06.360 --> 00:16:10.350

Like what you eat in your way well you know too often smoking your diet.

93

00:16:10.830 --> 00:16:20.550

So some families might like raise our kids on fast food nutrition exercise is important too much fat too much starch food what goes toward being healthy.

94

00:16:21.120 --> 00:16:22.830

Is what a person does.

95

00:16:23.190 --> 00:16:34.500

To themselves health comes down to individual choice can toby what's the boils down to the individual maybe every man for themselves, people are leaving well, I think, on the individual level, everyone has to their part, everybody plays.

96

00:16:34.710 --> 00:16:43.740

hard decisions, people can make in their own lives grow your own vegetables bicycles and green culture, maybe like.

97

00:16:46.320 --> 00:16:47.520

Green ways to.

98

00:16:49.980 --> 00:16:53.850

To do things I suppose anybody can make choices in their own life, and if you put.

99

00:16:54.210 --> 00:17:06.840

Enough plants in your House, you can be breathing fresh air, the majority of your time and then you as an individual are the one who's going to make the choice to put a filter want clean water or something if they choose to make healthy choices, you know fun good for them.

100

00:17:11.160 --> 00:17:18.690

Julie Sweetland | FrameWorks (she/her): Right so and the dominance I think if you're on this call you probably are familiar with this dominance of this idea of health individualism.

101

00:17:18.960 --> 00:17:24.720

Julie Sweetland | FrameWorks (she/her): This is one of the strongest and most consistent findings from our research on a range of health issues.

102

00:17:24.960 --> 00:17:35.130

Julie Sweetland | FrameWorks (she/her): Even when it came to environmental health where there really are very few individual health behaviors that are part of the problems people struggle to connect health and environments.

103

00:17:35.670 --> 00:17:45.690

Julie Sweetland | FrameWorks (she/her): People would readily agree, for instance, that of course air and water quality matter, but the role of policy in shaping these factors was almost totally absent from people's thinking.

104

00:17:45.990 --> 00:17:54.660

Julie Sweetland | FrameWorks (she/her): The sense was that environmental degradation is simply the price of modern life it's immutable can't change it, and that led people that shake people's.

105

00:17:55.260 --> 00:18:00.690

Julie Sweetland | FrameWorks (she/her): Thinking about solutions they were ultimately up to the individual water quality issues by Britta.

106

00:18:00.900 --> 00:18:10.230

Julie Sweetland | FrameWorks (she/her): Health, the air quality issues put some plants in your House, so the idea is this idea of individual in the wasn't as at the causes of health or illness happen at the individual level.

107

00:18:10.740 --> 00:18:21.930

Julie Sweetland | FrameWorks (she/her): Their benefits are consequences happen at the individual level, it affects me Maybe my family if i'm not if i'm if i'm you know in poor health but it's not a societal issue and that the solutions are at the individual level.

108

00:18:22.410 --> 00:18:29.310

Julie Sweetland | FrameWorks (she/her): Another part of this little picture mindset is a limited sense of the factors that shape health so.

109

00:18:29.700 --> 00:18:34.200

Julie Sweetland | FrameWorks (she/her): Many of you are probably working through a social determinants of health framework where we're talking about.

110

00:18:34.410 --> 00:18:46.980

Julie Sweetland | FrameWorks (she/her): 578 10 factors that really are shaping a great deal of health outcomes for the public we've got two maybe three determinants of health diet exercise and substance use will come up smoking in particular.

111

00:18:47.640 --> 00:18:54.180

Julie Sweetland | FrameWorks (she/her): This little story about solutions is just as simple and connected to these understandings of the problem.

112

00:18:54.450 --> 00:19:02.190

Julie Sweetland | FrameWorks (she/her): If health happens when people make the right choices, well then people reason that the solution is to tell them what the right choices are.

113

00:19:02.460 --> 00:19:09.120

Julie Sweetland | FrameWorks (she/her): Now, of course, we all know that health education has a role to play, but for the public, this model of.

114

00:19:09.900 --> 00:19:21.720

Julie Sweetland | FrameWorks (she/her): The solution is education and it crowds out thinking about any other types of solutions and ultimately SAS political will for the robust infrastructure that we need to to ensure health equity.

115

00:19:23.700 --> 00:19:36.690

Julie Sweetland | FrameWorks (she/her): So this helps to explain why, in our research messages about health that lead with health often don't work as expected so we've tested this on environmental, health

and we tested messages protection or public health.

116

00:19:36.990 --> 00:19:43.710

Julie Sweetland | FrameWorks (she/her): That didn't work framing the issue in terms of fairness actually worked better we tested this on oral health and found that.

117

00:19:44.430 --> 00:19:54.420

Julie Sweetland | FrameWorks (she/her): Health arguments and also economic arguments have very mixed effects it was better to make an argument that was about targeted universalism and i'll dig into that a little bit a few slides down.

118

00:19:55.080 --> 00:20:07.830

Julie Sweetland | FrameWorks (she/her): We tested different ways of framing tobacco related health disparities emphasizing that we emphasize negative health impacts and had no effect on public support for equity focus tobacco policies things like reinvesting.

119

00:20:08.280 --> 00:20:14.220

Julie Sweetland | FrameWorks (she/her): tech tobacco revenue into affected communities and framing the issue in terms of justice worked better.

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00:20:14.700 --> 00:20:21.330

Julie Sweetland | FrameWorks (she/her): And a recent experiment, where we tested different ways of framing gun violence prevention and a heavily republican midwestern state.

121

00:20:21.720 --> 00:20:32.640

Julie Sweetland | FrameWorks (she/her): When we lifted up potential health benefits it had no effect, it was flat lifted up messages about negative health impacts of gun violence it backfired actually reduce support for policy.

122

00:20:33.090 --> 00:20:40.380

Julie Sweetland | FrameWorks (she/her): Many conservative audiences said that they felt manipulated its attempt to manipulate them emotionally, and so they rejected those messages.

123

00:20:40.920 --> 00:20:48.660

Julie Sweetland | FrameWorks (she/her): framing the issue in terms of

democracy in that case work better, so what I want you to take from this is not, you should stop talking about health while.

124

00:20:48.900 --> 00:20:51.420

Julie Sweetland | FrameWorks (she/her): we're here to think about how to talk about health equity.

125

00:20:51.690 --> 00:20:58.290

Julie Sweetland | FrameWorks (she/her): But to be cautious about health as a message as the reason for why you are working on a particular issue.

126

00:20:58.470 --> 00:21:06.960

Julie Sweetland | FrameWorks (she/her): Are our research suggests that other ways of opening the argument and positioning the issue are more likely to be effective we'll get into those in just a moment.

127

00:21:07.320 --> 00:21:23.880

Julie Sweetland | FrameWorks (she/her): So people don't understand health, they also don't understand the sit the factors that create and perpetuate health disparities, so the nonce the findings that we have looked at or sorry the findings that we've uncovered.

128

00:21:25.140 --> 00:21:33.300

Julie Sweetland | FrameWorks (she/her): On these issues is that people tend to think about we lift up the issue of disparity some some groups are doing better than others.

129

00:21:33.720 --> 00:21:48.930

Julie Sweetland | FrameWorks (she/her): We tend to hear three explanations three mental models that people used to think about why that is so, the most dominant is cultural pathology the idea that those groups don't just don't have the right values or.

130

00:21:50.250 --> 00:21:57.450

Julie Sweetland | FrameWorks (she/her): Observing the right behaviors and that children and people who grow up in those communities have no choice but to kind of absorb those sorts of things.

131

00:21:58.080 --> 00:22:02.700

Julie Sweetland | FrameWorks (she/her): This is we've heard this particularly as a as a stereotype or.

132

00:22:03.540 --> 00:22:14.220

Julie Sweetland | FrameWorks (she/her): Harmful stereotype and inaccurate stereotypes about black communities, but it is, we have also heard it on other groups who face stigma and marginalization in American society.

133

00:22:15.120 --> 00:22:22.350

Julie Sweetland | FrameWorks (she/her): And we also there's also a model that's a little different is simply that if we're talking about different social groups.

134

00:22:23.550 --> 00:22:26.700

Julie Sweetland | FrameWorks (she/her): If you're not part of that social group it kind of doesn't affect you.

135

00:22:27.180 --> 00:22:39.030

Julie Sweetland | FrameWorks (she/her): So the idea that particularly that blacks and whites live in separate worlds, but we have heard this and you can see this as present as people who are identified as straight versus people who identify as LGBT plus.

136

00:22:39.600 --> 00:22:43.680

Julie Sweetland | FrameWorks (she/her): If that the idea that these groups are separate distinct and that there.

137

00:22:44.130 --> 00:22:48.060

Julie Sweetland | FrameWorks (she/her): They don't influence each other and so therefore a problem for one that particular group.

138

00:22:48.330 --> 00:23:04.020

Julie Sweetland | FrameWorks (she/her): is regrettable right it's too bad for that group, but if if i'm not part of that group I don't have a stake in that issue and and it won't affect me and then, finally, a third model that comes up frequently and talking about these issues is fatalism idea that.

139

00:23:05.460 --> 00:23:06.540

Julie Sweetland | FrameWorks (she/her): The idea that.

140

00:23:08.400 --> 00:23:26.820

Julie Sweetland | FrameWorks (she/her): That there isn't much we can do about these issues that these problems are what they are and that they not much can change King can change what it is and we have seen this in particular with folks who don't necessarily subscribe to those first two models of.

141

00:23:27.840 --> 00:23:38.220

Julie Sweetland | FrameWorks (she/her): Cultural cultural pathology or separate fates people who do have a structural understanding of the issue, sometimes that can lead contribute to a sense of fatalism and structure for so big.

142

00:23:39.600 --> 00:23:44.700

Julie Sweetland | FrameWorks (she/her): That we can't really fix them or change them it's a doomed to failure it's just too broken.

143

00:23:45.450 --> 00:23:58.200

Julie Sweetland | FrameWorks (she/her): So these are ways that people model health disparities and I know we're here to talk about health equity not disparities, particularly, but the model that the public has is one of inequality one of.

144

00:23:59.370 --> 00:24:07.950

Julie Sweetland | FrameWorks (she/her): Not not in the firm division of what we're going for but really a sense of the problem, so these are the ways that they people tend to think about these things.

145

00:24:08.400 --> 00:24:16.920

Julie Sweetland | FrameWorks (she/her): And if we are going to talk about health equity and start to paint a vision of what equity could be and what it would look like and what it takes to get there.

146

00:24:17.220 --> 00:24:33.780

Julie Sweetland | FrameWorks (she/her): are recent research suggests that just saying equity isn't enough i'm going to show you some clips into the zoom zoom focus groups that we conducted recently asking, particularly about those understandings of equity these focus groups were conducted.

147

00:24:35.160 --> 00:24:51.630

Julie Sweetland | FrameWorks (she/her): Homogenous Lee so you'll see clips from an all white group of white facilitator and all black group with a black facilitator and i'm curious to hear reactions and

questions about this in the q&a So the first is equity and i'm wondering if if if you have heard that term before.

148

00:24:53.220 --> 00:25:00.150

might have some thoughts about what it might mean that's all like home equity some sort of loan yeah you bought a house for say.

149

00:25:00.690 --> 00:25:12.000

202 50 and you know some years later it's worth 400 you know that gap there's equity equity and a life insurance policy what you've built towards something in my.

150

00:25:12.570 --> 00:25:28.470

Opinion is equity equity is kind of like basically how much leveraging the ass like going to be Is there something how much money like your businesses work are you talking about money, the money, equality and, if you think of equity in relation to race.

151

00:25:29.550 --> 00:25:33.570

What would be your guests of what it might mean like reasonable quality same thing.

152

00:25:34.770 --> 00:25:50.490

So is it I couldn't your quality, the sense that I get is that when people are taking equity they mean something more specific than when they're saying equality but I definitely have not seen it explained provide everybody, with the same opportunities to be able to be if they say.

153

00:25:51.540 --> 00:25:54.750

No matter what level they're on I have not heard it.

154

00:25:55.560 --> 00:26:02.970

mentioned as far as people I mean normally you hear about equity in your home, especially if you're poor and if you'd like you know.

155

00:26:03.060 --> 00:26:18.690

A lot of us we just like a couple generations removed from like slavery, so a lot of us are still trying to do from that gap and trying to get to that level, where we had equity and stuff that leverage integration quality forever, why is it changing the equity now Hussain equity.

156

00:26:21.120 --> 00:26:24.210

Julie Sweetland | FrameWorks (she/her): Okay, I apologize for my notes covering stuff up.

157

00:26:25.620 --> 00:26:36.420

Julie Sweetland | FrameWorks (she/her): Right let's do that um i'm gonna play a little bit after you guys again just to just to make up for that, but again when people are thinking equity they need something.

158

00:26:37.050 --> 00:26:45.660

Julie Sweetland | FrameWorks (she/her): more specific than when they're saying equality but I definitely have not seen it explained provide everybody, with the same opportunities to be able to be.

159

00:26:46.260 --> 00:26:50.730

Julie Sweetland | FrameWorks (she/her): Successful, no matter what like what level they're on I have not heard it.

160

00:26:51.540 --> 00:27:05.670

Julie Sweetland | FrameWorks (she/her): mentioned as far as people I mean normally you hear about equity in your home, especially if you're poor and if you play know a lot of us we just like a couple generations removed from like slavery, so a lot of us are still trying to do from that.

161

00:27:06.960 --> 00:27:07.680

Julie Sweetland | FrameWorks (she/her): You today.

162

00:27:11.970 --> 00:27:24.540

Julie Sweetland | FrameWorks (she/her): And i'm going to move on i'm going to try this one more time to get that quite right sorry it exited out at one point to me it's rushing to share it in the right way to go, play.

163

00:27:25.890 --> 00:27:31.410

Julie Sweetland | FrameWorks (she/her): play slideshow in window i'm doing that i'm sharing my screen and i'm sharing only that window.

164

00:27:32.250 --> 00:27:39.120

Julie Sweetland | FrameWorks (she/her): So I hope that that has now fixed the issue overall what I hope you can take from this is that.

165

00:27:39.810 --> 00:27:44.640

Julie Sweetland | FrameWorks (she/her): We need to remember that the default setting for American thinking on health is individualism.

166

00:27:45.000 --> 00:27:49.890

Julie Sweetland | FrameWorks (she/her): Most people don't understand how disparities are present and perpetuated.

167

00:27:50.130 --> 00:28:03.150

Julie Sweetland | FrameWorks (she/her): We can't assume that people are familiar with the term equity, the most common association with that, as in financial terms, in fact, if you Google, the term health equity, the first thing that comes up is an advertisement for a.

168

00:28:03.660 --> 00:28:11.010

Julie Sweetland | FrameWorks (she/her): Health savings account that helps people connect health and wealth and and while and and so Those are some things we're up against but.

169

00:28:11.400 --> 00:28:25.380

Julie Sweetland | FrameWorks (she/her): you're here, because while these are the places people that start where people start it doesn't have to be where people land, the way we frame issues can really make a difference, all right let's pop into the questions and, hopefully, it is not only.

170

00:28:26.580 --> 00:28:32.940

Julie Sweetland | FrameWorks (she/her): That I messed up the notes part of it is there anything anything that does come up here, where we can discuss for a moment.

171

00:28:34.980 --> 00:28:42.990

Carmen Nevarez: Yes, there are some interesting ideas that have come up from the audience and just one thing I want to remind everybody, you can use your Q amp a box.

172

00:28:43.290 --> 00:29:00.480

Carmen Nevarez: In order to ask questions and i'll do my best to make sure that we get them answered either separately or that we can pose

them to Julian so whole group, so there was an interesting issue that goes back a little bit to the discussion around elder older adults elderly.

173

00:29:02.040 --> 00:29:05.280

Carmen Nevarez: And I think it's a it's a little nuanced but i'd like you to.

174

00:29:05.730 --> 00:29:06.660

Carmen Nevarez: comment on it.

175

00:29:07.170 --> 00:29:21.930

Carmen Nevarez: And that is did you touch any of your testing, did you use the word elder and and if you didn't instead of elderly or, in addition to elderly is is there way that you could go back to do that.

176

00:29:22.440 --> 00:29:38.640

Carmen Nevarez: But then another follow on comment is the idea about testing elder is could be very important in working with certain communities, particularly indigenous communities, but that it might not translate in other languages.

177

00:29:40.260 --> 00:29:44.640

Carmen Nevarez: So just you know, do you have any thoughts about that any any evidence on that.

178

00:29:45.300 --> 00:29:59.430

Julie Sweetland | FrameWorks (she/her): So the connotations of elder and elderly are quite different, I think, for the reasons that probably the questioner had in mind so elder can break brings to mind with it more even say even among.

179

00:30:01.020 --> 00:30:07.410

Julie Sweetland | FrameWorks (she/her): You know my white folks that that is a someone with wisdom and then it has particular cultural connotations.

180

00:30:07.710 --> 00:30:25.770

Julie Sweetland | FrameWorks (she/her): And in indigenous communities as well as in black church settings and black communities, so I would not recommend against the term elder I would recommend recommend against the term elderly because it comes with associations of frailty

and in competence and cognitive decline.

181

00:30:26.910 --> 00:30:33.120

Carmen Nevarez: very helpful, thank you, could you also speak about mental models and other countries.

182

00:30:34.230 --> 00:30:40.920

Julie Sweetland | FrameWorks (she/her): I could, but I am not prepared to do so today, most of our research and other countries have been about.

183

00:30:41.670 --> 00:30:49.530

Julie Sweetland | FrameWorks (she/her): About early childhood and so it unless so on public health issues is not 100% true but, if you are interested, we have done.

184

00:30:50.040 --> 00:30:56.280

Julie Sweetland | FrameWorks (she/her): quite a bit of work on on how people think about the social determinants of health and things like obesity.

185

00:30:56.700 --> 00:31:11.250

Julie Sweetland | FrameWorks (she/her): In the UK, and that research is available on our website and but yeah i'm not not prepared to speak to some of the international work just just say that there are similarities and differences, these are cultural models to some extent, and so they will vary with culture.

186

00:31:12.330 --> 00:31:15.240

Carmen Nevarez: So the last question that's up here so far is.

187

00:31:17.160 --> 00:31:34.560

Carmen Nevarez: Just a comment on the on the street interviews that you showed originally when you're talking to people about health and I wonder if you could talk a little bit about whether you got the same kinds of responses about health from people who are not quite.

188

00:31:36.450 --> 00:31:52.680

Julie Sweetland | FrameWorks (she/her): So I think if you watch the video carefully, there are people of color in it for sure, and we have seen two things in our when we look cross cross culturally or across groups that we expect to have different opinions.

189

00:31:53.700 --> 00:32:02.550

Julie Sweetland | FrameWorks (she/her): Number One is that the model of individualism is shared quite broadly across many groups in American culture.

190

00:32:03.300 --> 00:32:21.120

Julie Sweetland | FrameWorks (she/her): Including groups who are not white The other thing is, is that the collective mindset, the systemic view is more present marine is more available often among groups who have had reason to come up against systems and recognize the role that they will they play.

191

00:32:22.620 --> 00:32:27.600

Carmen Nevarez: Okay well Those are the questions we received so far, so I just want to remind buddy buddy use your Q amp a.

192

00:32:27.780 --> 00:32:28.920

Carmen Nevarez: Tonight call.

193

00:32:28.950 --> 00:32:29.880

Carmen Nevarez: All right, well to bring up.

194

00:32:30.150 --> 00:32:44.700

Julie Sweetland | FrameWorks (she/her): Going yeah alright so shifting mindset strategies for changing the conversation i've got four strategies i'm going to share i'm going to just outline them right here, and then i'll dig into them across the time that remains so first if we aren't.

195

00:32:45.810 --> 00:32:53.310

Julie Sweetland | FrameWorks (she/her): As we're leaving room for people to assume that the problems are people who are experiencing the problems, then we need to.

196

00:32:53.760 --> 00:33:00.930

Julie Sweetland | FrameWorks (she/her): reframe to make sure we are clearly and carefully attributing responsibility to systemic structural or policy level factors.

197

00:33:01.800 --> 00:33:09.990

Julie Sweetland | FrameWorks (she/her): If our communication begins with a lot of numbers about poor health outcomes or a textbook definition of health equity that's not our best bring forward.

198

00:33:10.230 --> 00:33:16.440

Julie Sweetland | FrameWorks (she/her): Our recommendation is to lead with an explicit appeal to what we're aspiring for which is justice and fairness.

199

00:33:17.190 --> 00:33:22.920

Julie Sweetland | FrameWorks (she/her): And if we're leaving out solutions we are leaving support on the on the table and leaving supporters behind.

200

00:33:23.430 --> 00:33:35.430

Julie Sweetland | FrameWorks (she/her): And we only talk about little picture solutions like awareness and education we're not advancing the conversation, so the refrain is to emphasize collective solutions every single time.

201

00:33:35.820 --> 00:33:42.990

Julie Sweetland | FrameWorks (she/her): And when we have a clear solution that we're moving toward in a communication we then need to build an explanation.

202

00:33:43.590 --> 00:33:51.900

Julie Sweetland | FrameWorks (she/her): So it's not enough to just focus attention on who is experiencing disparities, of course, that's part of the issue, we need to include that information, but overall.

203

00:33:52.290 --> 00:34:05.190

Julie Sweetland | FrameWorks (she/her): To get people to understand where we can intervene and why that intervention would make a difference, we need to talk just as much about how disparities happen, how did they come to be and how we can end them and to do that, we can Center explanation.

204

00:34:05.550 --> 00:34:17.280

Julie Sweetland | FrameWorks (she/her): So that's your your rapid overview cheat sheet and i'll start to dig in so framing fixed number one strategy for advancing health equity is to attribute responsibility very carefully.

205

00:34:19.620 --> 00:34:31.230

Julie Sweetland | FrameWorks (she/her): So if the problem is articulated without referencing people or if the problem that we, the weird way we articulate implicitly or explicitly blames people who are creating the problem.

206

00:34:31.740 --> 00:34:37.350

Julie Sweetland | FrameWorks (she/her): or who are are experiencing the problem, then we are not going to get to health equity solutions so often.

207

00:34:37.680 --> 00:34:48.270

Julie Sweetland | FrameWorks (she/her): We see missing attribution and public health language so here's an example and us too many women are suffering from pregnancy complications that lead to serious injury and death.

208

00:34:48.540 --> 00:35:00.000

Julie Sweetland | FrameWorks (she/her): The rest of this communication and I excerpted it from went through went on to to really point out the troubling disparities of by race for paternal and maternal and infant health outcomes, but here.

209

00:35:01.770 --> 00:35:10.500

Julie Sweetland | FrameWorks (she/her): You know, nobody at this this doesn't say who or what is responsible for the problem or the solution that leaves too much room for fatalism, what can be done.

210

00:35:11.460 --> 00:35:23.220

Julie Sweetland | FrameWorks (she/her): And so, an example is a refrain is is here it's on the right here on the plane side, the US is failing to manage complications that lead to serious injury and death.

211

00:35:23.490 --> 00:35:31.230

Julie Sweetland | FrameWorks (she/her): So this grammatically puts the nation is the subject of the sentence and that's the party that needs to you know driving the action and there is an action.

212

00:35:31.860 --> 00:35:43.830

Julie Sweetland | FrameWorks (she/her): And the nation is failing to take in US framing but we could take, we could manage it so avoid missing attribution The other thing is to avoid individual APP and

attribution so here, this is.

213

00:35:44.220 --> 00:35:50.430

Julie Sweetland | FrameWorks (she/her): No says that if moms would just quit smoking, we could prevent 800 you know infant deaths a year.

214

00:35:51.060 --> 00:35:56.340

Julie Sweetland | FrameWorks (she/her): So that that just if they would just quit smoking explicitly blames women for this problem.

215

00:35:56.580 --> 00:36:12.870

Julie Sweetland | FrameWorks (she/her): i've gotten feedback on this example it's too out there and unrealistic nobody would ever say that but I actually this is literally a quote, that I lifted from a major national newspaper and appeared in the last two years, so an alternative, well, we can say instead is to point to.

216

00:36:14.100 --> 00:36:22.950

Julie Sweetland | FrameWorks (she/her): Who, you know, make a make a make an implicit argument about who is responsible and where responsibility for this problem lies, so researchers estimate that.

217

00:36:23.160 --> 00:36:31.590

Julie Sweetland | FrameWorks (she/her): If we connected expecting families to treatment for nicotine dependency, we could prevent those deaths of it by talk about families, not just the women that brings the whole.

218

00:36:32.040 --> 00:36:39.240

Julie Sweetland | FrameWorks (she/her): secondhand smoke into the picture and it makes it a fixed rate about access to.

219

00:36:40.230 --> 00:36:54.780

Julie Sweetland | FrameWorks (she/her): Care rather than a personal behavior right according so attributing that responsibility is really important, it flows throughout all the all the health equity communications and, if you take one thing away from this, I hope that this is, this is the thing.

220

00:36:55.590 --> 00:37:04.380

Julie Sweetland | FrameWorks (she/her): And so to do that to attribute responsibility appropriately one thing to try or pay attention

questions you can ask yourself, is to.

221

00:37:04.890 --> 00:37:15.930

Julie Sweetland | FrameWorks (she/her): Do my statements about health problems included concrete subject and an active verbs have often there's a lot of verbs that indicate some sort of ongoing state just varies exist persist for maine.

222

00:37:16.830 --> 00:37:22.380

Julie Sweetland | FrameWorks (she/her): And those are telltale sign that the communication is we're treating responsibility to no one, and nothing.

223

00:37:22.710 --> 00:37:37.890

Julie Sweetland | FrameWorks (she/her): And the that that back you that whole right, then the no no one's responsible will not stay just open and mysterious people will fill in with those attributions that they already have individualism and cultural mythology so we want to avoid that.

224

00:37:38.490 --> 00:37:43.740

Julie Sweetland | FrameWorks (she/her): We need to be specific and attributing responsibility, but that doesn't mean we need to be blaming so.

225

00:37:44.550 --> 00:37:52.650

Julie Sweetland | FrameWorks (she/her): A tone that points clearly right to structural factors that can change but doesn't necessarily point fingers maybe in many settings.

226

00:37:53.130 --> 00:38:03.120

Julie Sweetland | FrameWorks (she/her): be the most effective way to bring lots of people into that conversation, and so a way to do that as rather than pointing to specific.

227

00:38:03.720 --> 00:38:21.180

Julie Sweetland | FrameWorks (she/her): Individuals that may be causing yourself a problem isn't there's some exceptions to this but, but in general, pointing to systems structures programs processes policies right or just ideology cultural kind of the cultural middle you.

228

00:38:22.410 --> 00:38:30.540

Julie Sweetland | FrameWorks (she/her): can help to really locate responsibility but don't leave it out, because people will fill it in, and they will fill it in and waste probably hope they wish they wouldn't.

229

00:38:31.170 --> 00:38:38.640

Julie Sweetland | FrameWorks (she/her): framing fixed number to lead with the aspiration, not the problem, often and public health, we are using data to.

230

00:38:39.030 --> 00:38:46.710

Julie Sweetland | FrameWorks (she/her): To arrive at our understanding of which issues need to be tackled most urgently and where our targeted efforts would make most.

231

00:38:47.220 --> 00:38:57.300

Julie Sweetland | FrameWorks (she/her): Make the most difference that social analysis that public health analysis is critical and essential to addressing health disparities and driving equity.

232

00:38:57.690 --> 00:39:09.000

Julie Sweetland | FrameWorks (she/her): But that public health analysis is not the same as a communications analysis and when we put those data without context out there and attempt to kind of in the hope that it will kind of shocked people right into action.

233

00:39:09.570 --> 00:39:16.170

Julie Sweetland | FrameWorks (she/her): or shaming them, you know into change lots of social science, research has shown that that that just doesn't work.

234

00:39:17.010 --> 00:39:25.020

Julie Sweetland | FrameWorks (she/her): But hey let's just use an example for Twitter from Twitter, instead, this is a little meme a title that came out in.

235

00:39:25.620 --> 00:39:36.450

Julie Sweetland | FrameWorks (she/her): conjunction with a documentary by Jamie Oliver came out a couple years ago, and so the UK 26,000 primary age kids were admitted to hospital last year because of tooth decay caused by sugar.

236

00:39:36.870 --> 00:39:49.800

Julie Sweetland | FrameWorks (she/her): And in some you know some measure, this would be a very effective communication 712 retweets 377 favorites, and so this this number right kind of caught people's attention.

237

00:39:50.340 --> 00:39:55.680

Julie Sweetland | FrameWorks (she/her): I caught their attention but did it change their associations, the comments you know suggest not.

238

00:39:56.130 --> 00:40:05.070

Julie Sweetland | FrameWorks (she/her): So here's some of the comments that came after this first one okay it's because of sugar and neglectful parents forgot that part right so blaming individuals.

239

00:40:05.460 --> 00:40:17.340

Julie Sweetland | FrameWorks (she/her): And second one educate educate educate cook homemade food, drink water take responsibility for your children's health, this has both personal behavior individualism and education and information as the answer.

240

00:40:18.090 --> 00:40:22.950

Julie Sweetland | FrameWorks (she/her): it's impossible to emit sugar from the diets what can we do so fatalism right.

241

00:40:23.190 --> 00:40:31.560

Julie Sweetland | FrameWorks (she/her): And then I don't take sugar as I hate sweet things, and so this is one of the effects of fatalism have that big social problem is too big for me to engage with you know what let me.

242

00:40:31.800 --> 00:40:41.850

Julie Sweetland | FrameWorks (she/her): hunker down cocoon and handle me in mind and that's exactly the opposite of the movement based and civic engagement kind of thinking that we need to drive health equity.

243

00:40:42.750 --> 00:40:53.550

Julie Sweetland | FrameWorks (she/her): Next, one I fuse give my son drinks and sweeteners in them check right i've done my individual behavior i've done my one thing I can check off that social problem from my list and leave it on someone else's list.

244

00:40:53.850 --> 00:40:59.280

Julie Sweetland | FrameWorks (she/her): A consumerist response right we've got it we've got an APP for that we've got tooth brushing we can help with that.

245

00:40:59.490 --> 00:41:13.890

Julie Sweetland | FrameWorks (she/her): And then the one person who takes a structural view all right, well done, but good luck i've worked in special care services for 27 years we've over a year waiting list, good luck twice, because that problem is clearly too big to fix so naked numbers.

246

00:41:14.850 --> 00:41:25.590

Julie Sweetland | FrameWorks (she/her): People if we don't wrap them and interpretation, people will wrap them in their own interpretations and those interpretations will come from those six mental models that i've talked about before.

247

00:41:26.280 --> 00:41:39.510

Julie Sweetland | FrameWorks (she/her): So one of the way and another piece of examples for for why just leaving with health or reading with numbers is not our best foot forward, we need to lead with the aspiration, not the problem when we tested different statements of the problem on.

248

00:41:41.100 --> 00:41:55.950

Julie Sweetland | FrameWorks (she/her): against their ability to boost public will for equity focus tobacco policies we tested, a message about it just being a preventable problem that had no measurable effects on people's attitudes or policy preferences.

249

00:41:57.180 --> 00:42:02.940

Julie Sweetland | FrameWorks (she/her): When we talked about the economic impacts in terms of lost productivity increased health care costs with the public.

250

00:42:03.090 --> 00:42:15.900

Julie Sweetland | FrameWorks (she/her): mainland differently with legislators are folks in systems, but with the public, it backfired on this issue, where do support by four to 6% on the policies this group is trying to do, and people blame smokers for harming the economy.

251

00:42:16.650 --> 00:42:26.400

Julie Sweetland | FrameWorks (she/her): When we talked about disparities of the last mile we kind of had an overall progress but they're still high prevalence in communities of color LGBT rural etc.

252

00:42:26.730 --> 00:42:37.560

Julie Sweetland | FrameWorks (she/her): That backfired as well, it reduced the public's belief that policy mattered at all and people blame those affected groups for the poor choices so focusing leading with the problem.

253

00:42:38.160 --> 00:42:47.160

Julie Sweetland | FrameWorks (she/her): Rather than the aspiration leaves a lot of room for people to call up what they think they know about that problem, and so what we have found across lots of health issues, and this is.

254

00:42:47.460 --> 00:42:55.860

Julie Sweetland | FrameWorks (she/her): Finding this study as well, is it leading with an aspiration of goal that's not health, but something else is very effective and on health equity.

255

00:42:56.070 --> 00:43:06.030

Julie Sweetland | FrameWorks (she/her): A version of justice adjust society, make sure that no Community is singled out or overexposed for harm or just society ensures that the supports and resources for everyone to participate.

256

00:43:06.750 --> 00:43:19.530

Julie Sweetland | FrameWorks (she/her): and be, you know as we age or etc are available that has been a more effective framing of this and this particular case, increase support for equity focused tobacco policies by four to 6%.

257

00:43:19.800 --> 00:43:29.400

Julie Sweetland | FrameWorks (she/her): And, unlike the other framing of this it really reduced the stigma and blame on the people reported they're they're kind of anti-smoker attitudes.

258

00:43:30.480 --> 00:43:35.700

Julie Sweetland | FrameWorks (she/her): So we recommend that on health equity issues you lead with one of these flavors of fairness.

259

00:43:36.210 --> 00:43:45.030

Julie Sweetland | FrameWorks (she/her): One being something around like a targeted universalism kind of argument a tailored approach arguments on our research we've talked about this as targeted justice.

260

00:43:45.600 --> 00:43:54.330

Julie Sweetland | FrameWorks (she/her): We need to ensure that everyone has access what they need to support good health, that means recognizing and accommodating specific needs, because health isn't one size fits all.

261

00:43:54.780 --> 00:44:03.990

Julie Sweetland | FrameWorks (she/her): Another flavor of fairness that we have seen to be really effective particularly across partisan across partisan ways is sometimes people call it the zip code argument.

262

00:44:04.320 --> 00:44:14.430

Julie Sweetland | FrameWorks (she/her): fall asleep fairness across places right that everyone should have an equitable, by which I spare and just opportunity to be as healthy as possible, no matter where they live, work or play.

263

00:44:14.790 --> 00:44:23.670

Julie Sweetland | FrameWorks (she/her): And to do that we need to address social problems and unfair practices and unjust conditions that can weaken the health of specific types of Americans.

264

00:44:24.000 --> 00:44:30.120

Julie Sweetland | FrameWorks (she/her): And then, a third flavor of fairness is this idea of adjust society being inclusive and fair.

265

00:44:30.720 --> 00:44:36.840

Julie Sweetland | FrameWorks (she/her): So adjust society ensures that no person, regardless of the color of their skin or who they love is exposed again and again.

266

00:44:37.080 --> 00:44:47.760

Julie Sweetland | FrameWorks (she/her): To things we know are harmful and to live up to that idea of justice for all we have to tackle the unconditioned unhealthy conditions and barriers to help that affect some communities more than others.

267

00:44:48.000 --> 00:44:55.320

Julie Sweetland | FrameWorks (she/her): So I haven't just slapped the label health equity or social justice on something we see that people don't have the.

268

00:44:56.280 --> 00:45:02.340

Julie Sweetland | FrameWorks (she/her): associations that those naked terms can bring up can be problematic and so an elaborated.

269

00:45:03.090 --> 00:45:09.720

Julie Sweetland | FrameWorks (she/her): appeal to the value and explicit statement of what we mean by fairness and justice and giving him a little room to.

270

00:45:10.140 --> 00:45:16.050

Julie Sweetland | FrameWorks (she/her): breathe right, this is, these are a sentence or two, that is one of the most effective things you can do to open the conversation.

271

00:45:16.500 --> 00:45:19.890

Julie Sweetland | FrameWorks (she/her): Rather than close it down or or keep people stuck where they are.

272

00:45:20.460 --> 00:45:25.770

Julie Sweetland | FrameWorks (she/her): So let me show you a little data from that and that opportunity for we tested and on our oral health work.

273

00:45:26.100 --> 00:45:34.320

Julie Sweetland | FrameWorks (she/her): An opportunity for all kind of everyone deserves right every what we need to ensure that everyone has equal access to good conditions and supports and services.

274

00:45:34.920 --> 00:45:40.320

Julie Sweetland | FrameWorks (she/her): versus that tailored or targeted justice that I talked about, we need to ensure that everyone has access, and that means.

275

00:45:40.590 --> 00:45:51.960

Julie Sweetland | FrameWorks (she/her): Recognizing and accommodating

specific needs, when we tested those to head to head for their ability to to boost support for policies like ensuring culturally and linguistically competent care.

276

00:45:52.620 --> 00:45:58.080

Julie Sweetland | FrameWorks (she/her): Including oral health and medicaid coverage, things are really going to get at the disparities on that issue.

277

00:45:58.650 --> 00:46:09.210

Julie Sweetland | FrameWorks (she/her): We saw that that targeted justice version frame outperformed opportunity for all so compared to a control group that got no message.

278

00:46:09.840 --> 00:46:17.100

Julie Sweetland | FrameWorks (she/her): The the targeted justice group led to between four and 8% increase in different policies and attitudes.

279

00:46:18.060 --> 00:46:25.230

Julie Sweetland | FrameWorks (she/her): Whereas the opportunity for all statement have no statistically significant effects because the same as saying nothing basically.

280

00:46:25.890 --> 00:46:32.280

Julie Sweetland | FrameWorks (she/her): So, being a little stronger and specific in your definition about what you mean by fairness, we see can help.

281

00:46:33.210 --> 00:46:38.730

Julie Sweetland | FrameWorks (she/her): Let me give you an example of what that looks like in messaging so here on the left.

282

00:46:39.300 --> 00:46:49.320

Julie Sweetland | FrameWorks (she/her): is leading with health right, so this is saying before coded we had lots of preventable disease and death, those are excuses, this is about health or not Americans aren't as healthy as they can be.

283

00:46:49.560 --> 00:46:52.140

Julie Sweetland | FrameWorks (she/her): They don't have the basic block building blocks of health.

284

00:46:52.470 --> 00:47:04.620

Julie Sweetland | FrameWorks (she/her): A names of some of those things that that do that and we need to create healthy environments, so that we can decrease right the hardship of disease, so this is all about know all about health all the time, a reframe.

285

00:47:05.280 --> 00:47:17.700

Julie Sweetland | FrameWorks (she/her): Was fairness might look like this, so pointing out that there are different rates of chronic disease and death in different places and that's letting us know that we've got uneven access to healthy environments.

286

00:47:17.940 --> 00:47:24.750

Julie Sweetland | FrameWorks (she/her): And then, explaining that giving some explanation so some neighborhoods are cut off from the supply of fresh affordable food.

287

00:47:25.140 --> 00:47:30.540

Julie Sweetland | FrameWorks (she/her): fun fact we found that that phrasing is more effective than talking about food deserts but that's another topic for another day.

288

00:47:31.260 --> 00:47:38.250

Julie Sweetland | FrameWorks (she/her): Some areas have streets and buildings arranged in ways that concentrate air pollution, but others are a range to promote a sense of community.

289

00:47:38.580 --> 00:47:43.890

Julie Sweetland | FrameWorks (she/her): And so we need to really improve unhealthy conditions, wherever they exist, so this is making.

290

00:47:44.760 --> 00:47:50.160

Julie Sweetland | FrameWorks (she/her): A I haven't haven't shouted, this is about justice from the rooftops, but this is clearly about.

291

00:47:50.730 --> 00:48:00.750

Julie Sweetland | FrameWorks (she/her): eliminating differences in place that affect that pre different health environments, and this is the type of a framing that we have seen is more effective than just talking about health.

292

00:48:01.590 --> 00:48:12.330

Julie Sweetland | FrameWorks (she/her): Another example instead of simply expecting that the numbers, the differences in population outcomes will help people understand that it's structural.

293

00:48:12.810 --> 00:48:20.100

Julie Sweetland | FrameWorks (she/her): We found found that that often here can't be taken for granted, so on the left, this is a version of a naked numbers problem.

294

00:48:20.610 --> 00:48:32.760

Julie Sweetland | FrameWorks (she/her): Where really it's better framed and then it gives people a sense of the scale of the problem with you some great social math here right so tobacco causes more depth and these accidents and homicides combined.

295

00:48:33.540 --> 00:48:44.250

Julie Sweetland | FrameWorks (she/her): And there's a real burden here, but my concern here is a couple of things framing wise is one the comparison of like you know homicides and AIDS as those are.

296

00:48:45.000 --> 00:48:48.510

Julie Sweetland | FrameWorks (she/her): stigmatized right health issues and I wouldn't necessarily want to put those right.

297

00:48:49.020 --> 00:48:56.280

Julie Sweetland | FrameWorks (she/her): Next to people's perception of the black Community because of that issue of cultural pathology and how easily that comes to mind.

298

00:48:56.940 --> 00:49:05.310

Julie Sweetland | FrameWorks (she/her): But also it doesn't tell us why, and if it doesn't tell us why people will fill in the y with what they think they know about the about the effect and groups.

299

00:49:05.430 --> 00:49:15.090

Julie Sweetland | FrameWorks (she/her): So let's get some why in there, instead of talking about unequal outcomes talk about the unequal obstacles so we've got a responsibility for a just society.

300

00:49:15.660 --> 00:49:27.750

Julie Sweetland | FrameWorks (she/her): To ensure that nobody's exposed again again to things that we know are harmful, yet our policies, let tobacco companies channel higher levels of advertising discounts and displays they're dangerous products into black communities.

301

00:49:28.050 --> 00:49:33.840

Julie Sweetland | FrameWorks (she/her): And that is what contributes to the health problems and live up to that ideal of fairness, we must change these practices.

302

00:49:34.230 --> 00:49:44.850

Julie Sweetland | FrameWorks (she/her): So I talk first about attribution of responsibility, and you can see here that this is really talking about who's responsible for pausing and fixing the problem right a little bit less about who's affected by the problem.

303

00:49:45.750 --> 00:49:53.730

Julie Sweetland | FrameWorks (she/her): We needed we affected party doesn't go away, but it's not the whole story right it's it's about us and our responsibility to.

304

00:49:54.420 --> 00:50:11.400

Julie Sweetland | FrameWorks (she/her): Be fair and to be just and so, but then also appealing to that idea of justice with an explicit appeal when are we going forward going for adjust society and then giving you an example of how we're not living up to that and I think at the level of something that we can change.

305

00:50:12.780 --> 00:50:23.070

Julie Sweetland | FrameWorks (she/her): So here are two kind of restatements of these or i've mentioned the first one, a couple of times the second one, this is a way that I might advise you to kind of.

306

00:50:24.210 --> 00:50:33.450

Julie Sweetland | FrameWorks (she/her): express the idea of health equity So if you have committed already as a department or organization to talking about her equity a first of all, a plus awesome go for you.

307

00:50:33.750 --> 00:50:37.110

Julie Sweetland | FrameWorks (she/her): good for you, and please keep

leading us in that direction and be.

308

00:50:37.500 --> 00:50:47.250

Julie Sweetland | FrameWorks (she/her): Looking at your language and how you're doing, and if you haven't defined what you mean by it please understand that that that language may not be resonating and may not be helping you as much as you would hope.

309

00:50:48.060 --> 00:50:57.690

Julie Sweetland | FrameWorks (she/her): All right, i'm going to pause there, who I see lots of Q and a's hopefully they're not all your notes over the screen Carmen anything juicy in there and we could stop and talk about for a second.

310

00:50:58.350 --> 00:51:02.520

Carmen Nevarez: So really juicy stuff lots of stuff has come up in the last.

311

00:51:03.180 --> 00:51:19.170

Carmen Nevarez: In the last 15 minutes, so let me just I tried to group them so that we didn't have to go one by one, and let me start with some research related questions, how can, how can you use mental models in research number one and then number two is.

312

00:51:20.970 --> 00:51:24.210

Carmen Nevarez: Talk for a minute about why.

313

00:51:25.410 --> 00:51:42.900

Carmen Nevarez: What is the hypothesis about why justice is a useful frame and then finally point how how frames been tested and do they change is there evidence that they show change in mental models over time.

314

00:51:45.720 --> 00:51:48.030

Julie Sweetland | FrameWorks (she/her): So mental models are.

315

00:51:49.470 --> 00:51:59.970

Julie Sweetland | FrameWorks (she/her): they're fascinating but from a change makers point of view they're only worth understanding, because they can be changed, and so they are durable, they are slow to change.

316

00:52:00.540 --> 00:52:10.470

Julie Sweetland | FrameWorks (she/her): But they It is absolutely possible to introduce right new ideas to expand the boundaries of a mental model, so we saw that i'm saying marriage equity right we didn't change the definition of.

317

00:52:10.740 --> 00:52:12.960

Julie Sweetland | FrameWorks (she/her): Marriage advocates didn't change the definition of.

318

00:52:13.200 --> 00:52:25.410

Julie Sweetland | FrameWorks (she/her): A marriage so much you know that as a committed relationship between two people, but they just expanded the boundaries of that include same sex couples, as well as opposite sex couples so So yes, they can be changed and that is why we.

319

00:52:25.620 --> 00:52:34.050

Julie Sweetland | FrameWorks (she/her): conduct them why we conduct interviews and other analyses to kind of be precise about that what those mental models are.

320

00:52:35.520 --> 00:52:42.060

Julie Sweetland | FrameWorks (she/her): In terms of why our hypothesis, as to why justice or fairness has ended up being an effective.

321

00:52:44.520 --> 00:52:51.960

Julie Sweetland | FrameWorks (she/her): and effective framing strategy on health topics I mean so first of all, it is better than leading with health right so kind of.

322

00:52:52.410 --> 00:53:07.710

Julie Sweetland | FrameWorks (she/her): That but its collective right is necessarily the way we expressed it explained it is, it is a collective society level issue, which has a powerful kind of inoculating effect against the strong individualism that comes across on health.

323

00:53:10.080 --> 00:53:17.820

Julie Sweetland | FrameWorks (she/her): And I think that that's that's that's one of the main issues The other thing I think that makes it work in the way that we advise it is that is not.

324

00:53:19.800 --> 00:53:25.170

Julie Sweetland | FrameWorks (she/her): it's elevating it's expressing an aspiration it's not.

325

00:53:26.430 --> 00:53:35.220

Julie Sweetland | FrameWorks (she/her): it's not done in a really rhetorical or arguments of tone again it's pointing to the aspiration, not to our failure to achieve it.

326

00:53:36.120 --> 00:53:51.780

Julie Sweetland | FrameWorks (she/her): Right off the BAT and that opening right brings in more people, we need to talk about the problems absolutely, but if we lead with problem problem problem there's a lot of research that suggests that there is passionate fatigue right and people just get overwhelmed and now.

327

00:53:54.000 --> 00:54:01.740

Carmen Nevarez: Well, really good we've gotten we've gotten some more questions haven't a chance to read it, but let me give you a couple of really practical issues.

328

00:54:01.740 --> 00:54:03.600

Carmen Nevarez: That come up over and over and over again.

329

00:54:03.810 --> 00:54:14.190

Carmen Nevarez: So how do you use framing and red states and particularly if you're part of red state government, how do you use the framing concept without.

330

00:54:15.360 --> 00:54:18.510

Carmen Nevarez: alienating the the Community that you're trying to.

331

00:54:19.380 --> 00:54:20.550

Carmen Nevarez: Find to operate within.

332

00:54:21.030 --> 00:54:30.150

Julie Sweetland | FrameWorks (she/her): Absolutely Well, first of all I want to plug that we're going to do a webinar, particularly on that topic and just to meet and so i'm holding some of our coolest graphs back.

333

00:54:30.600 --> 00:54:33.990

Julie Sweetland | FrameWorks (she/her): To really show how these things can work across partisan divides.

334

00:54:34.860 --> 00:54:40.380

Julie Sweetland | FrameWorks (she/her): But I will say that you know if any of these bar graphs that I flipped up there to say look this frameworks breach.

335

00:54:40.650 --> 00:54:48.150

Julie Sweetland | FrameWorks (she/her): or any results that those are from nationally representative survey experiments, and so we are seeing that those frames, are working.

336

00:54:48.810 --> 00:54:53.910

Julie Sweetland | FrameWorks (she/her): You know they don't necessarily work, the same across across the divide, but they do work to some extent.

337

00:54:54.480 --> 00:54:58.830

Julie Sweetland | FrameWorks (she/her): With more conservative audiences and I think the explanation.

338

00:54:59.220 --> 00:55:12.000

Julie Sweetland | FrameWorks (she/her): That i'm going to get to toward the end is really the the framing superpower when it comes to one of the training superpowers when it comes to reaching out to conservatives so maybe i'll ask that that listener keep listening and see how that works.

339

00:55:13.710 --> 00:55:22.710

Carmen Nevarez: Okay, well, let me go back a little bit to something that got brought up by several people when looking at the videos would you go into a little bit more clarity.

340

00:55:23.190 --> 00:55:41.760

Carmen Nevarez: Clarification around equity versus equality and framing differences there and then maybe touch on in equity and is there anything that you can say about the differences between communities of color and their their understanding on equity.

341

00:55:43.170 --> 00:55:59.550

Julie Sweetland | FrameWorks (she/her): Okay, so what we found is that the term equity is not widely understood by non experts by people who aren't working and kind of some sort of social change profession right, the primary association, both among white people and black people.

342

00:56:00.690 --> 00:56:08.130

Julie Sweetland | FrameWorks (she/her): We did not read this this research was only conducted in English and did not include all kinds of flavors of Americans, but those two focus groups.

343

00:56:08.730 --> 00:56:21.870

Julie Sweetland | FrameWorks (she/her): The primary association was financial when pressed to connect it to race people the language that people naturally kind of gravitated to was that of equality and equality of opportunity.

344

00:56:22.920 --> 00:56:26.400

Julie Sweetland | FrameWorks (she/her): I have seen that we have spent a lot of time in.

345

00:56:27.600 --> 00:56:39.780

Julie Sweetland | FrameWorks (she/her): In fairness, related social justice work distinguishing between equality and equity and I think that thinking is valuable because it's pushing us to define what we mean by fairness.

346

00:56:40.770 --> 00:56:52.920

Julie Sweetland | FrameWorks (she/her): But I don't think it'd be very useful for us to go out into the public and say no, no don't don't talk about the quality talk about equity, because that would be kind of heard as too easy for that to be heard political correctness or.

347

00:56:55.020 --> 00:57:01.890

Julie Sweetland | FrameWorks (she/her): But so is more helpful rather than kind of kind of correcting rather than correcting the vocabulary people have.

348

00:57:02.310 --> 00:57:13.470

Julie Sweetland | FrameWorks (she/her): And gets more helpful for us to define the vocabulary that we're using right, and so, if you looked

at where it's an example see if I can go back without ruining anything and.

349

00:57:14.880 --> 00:57:24.960

Julie Sweetland | FrameWorks (she/her): Everyone should have an equitable parentheses, fair and just opportunity to be as healthy as possible alright, so there i've used the the language that people have.

350

00:57:25.830 --> 00:57:38.460

Julie Sweetland | FrameWorks (she/her): Around fairness, if people said yeah we shall be equal I wouldn't go in and say no, no, it shouldn't be equal to be equitable like that's not going to be helpful in Community but really building in this idea that it's about ensuring.

351

00:57:39.510 --> 00:57:44.910

Julie Sweetland | FrameWorks (she/her): fair outcomes right, not just fear opportunities all those sorts of ideas we're trying to build into that concept of equity.

352

00:57:46.680 --> 00:57:53.760

Carmen Nevarez: Okay i'm just a couple of points to everybody, this whole thing is being recorded and you will be able to listen to this at your.

353

00:57:54.870 --> 00:57:59.550

Carmen Nevarez: As much as you like going into the future we'll have as much as we can.

354

00:58:00.030 --> 00:58:10.170

Carmen Nevarez: Whatever opportunities we can take to answer the questions that are unanswered now i'm going to throw two more comments in before you go on to the last part one is, what do you do when good public health.

355

00:58:10.980 --> 00:58:20.940

Carmen Nevarez: policy becomes politicized and just take the facemask issues and example So how do you manage that, is there any way that framing can help us to do this better.

356

00:58:21.840 --> 00:58:24.420

Julie Sweetland | FrameWorks (she/her): Absolutely framing can help us do that better.

357

00:58:25.350 --> 00:58:44.010

Julie Sweetland | FrameWorks (she/her): And there are there's so much good work happening in this area of masks a particularly so I don't know that i've got the depth to speak on that extensively, but what I will say is that making the affirmative case right what is true what do you want to have happen, what is evidence based.

358

00:58:45.210 --> 00:58:50.250

Julie Sweetland | FrameWorks (she/her): elaborating on that make putting it in very clear and simple terms.

359

00:58:51.360 --> 00:58:54.420

Julie Sweetland | FrameWorks (she/her): That Those are some of the most important strategies for.

360

00:58:55.770 --> 00:59:15.630

Julie Sweetland | FrameWorks (she/her): For inoculating the vast persuadable middle against little politicization and then, when it comes to countering this information right when you do need to directly speak to misinformation or harmful understandings labeling that clear when he saying, therefore, it is a harmful myth that.

361

00:59:17.460 --> 00:59:20.940

Julie Sweetland | FrameWorks (she/her): masks don't make a difference and as a harmful myth that.

362

00:59:22.230 --> 00:59:28.980

Julie Sweetland | FrameWorks (she/her): People are safer with guns in the home right, you know those sorts of things really saying that it's it's.

363

00:59:29.910 --> 00:59:45.000

Julie Sweetland | FrameWorks (she/her): it's a misunderstanding and labeling it as such, there are other strategies that can be used in different contexts it's a whole nother conversation but good good question and certainly part of what were the context for anytime we're talking about public health issues, these days.

364

00:59:45.570 --> 00:59:50.040

Carmen Nevarez: Okay, so just one last one and i'm sorry i'm not getting to everybody's issues you've really.

365

00:59:50.040 --> 00:59:50.520

Carmen Nevarez: Really, some.

366

00:59:50.550 --> 00:59:53.550

Julie Sweetland | FrameWorks (she/her): Great great great you've got so many questions.

367

00:59:54.090 --> 01:00:02.610

Carmen Nevarez: Yes, it sure is so talk a little bit if you can about the race class narrative is developed by shanker so do and henny Lopez.

368

01:00:03.090 --> 01:00:12.270

Julie Sweetland | FrameWorks (she/her): Oh yes, i'm okay there's a thing, called the race class narrative developed by not check rosario and in handy Lopez.

369

01:00:13.380 --> 01:00:17.670

Julie Sweetland | FrameWorks (she/her): I think it's it's at that level of narrative meaning.

370

01:00:19.590 --> 01:00:29.130

Julie Sweetland | FrameWorks (she/her): At the level of big ideas and patterns right kind of a template a pattern for how we can talk about issues, it can be very effective.

371

01:00:29.820 --> 01:00:34.110

Julie Sweetland | FrameWorks (she/her): it's it, but the devils in the details and the turning it into stories right.

372

01:00:34.350 --> 01:00:47.820

Julie Sweetland | FrameWorks (she/her): So if you are familiar, that narrative you kind of gotten the memo on that literally the memo on that and see it that narrative itself is not meant to be just kind of use verbatim right it's kind of a theme that people are supposed to elaborate on.

373

01:00:48.690 --> 01:00:53.400

Julie Sweetland | FrameWorks (she/her): And I think the work there is as well done and I would point people to it.

374

01:00:54.600 --> 01:00:56.340

Carmen Nevarez: Okay well you go on and i'll.

375

01:00:56.700 --> 01:00:56.940

Julie Sweetland | FrameWorks (she/her): Keep.

376

01:00:57.210 --> 01:01:00.210

Carmen Nevarez: i'll keep right questions keep them coming they're really good.

377

01:01:00.300 --> 01:01:03.840

Julie Sweetland | FrameWorks (she/her): yeah yeah these are These are tough ones you guys are putting me through my paces all right.

378

01:01:04.500 --> 01:01:15.510

Julie Sweetland | FrameWorks (she/her): framing fix three i'm sorry, so we are going to attribute responsibility carefully, we are going to lead with what we want, not with what we are fighting and then.

379

01:01:16.200 --> 01:01:29.280

Julie Sweetland | FrameWorks (she/her): We really it's important that we are clear, not just that problems exist, but that solutions exist and are within our reach, not that they're easy or simple or they're going to you know come out.

380

01:01:31.140 --> 01:01:41.250

Julie Sweetland | FrameWorks (she/her): come out of nowhere, but that they are feasible so over, and the reason this matters is because we have seen time and time again in our own research, but also in.

381

01:01:41.670 --> 01:01:45.330

Julie Sweetland | FrameWorks (she/her): The scholarship that people who investigate and have studied crisis framing.

382

01:01:46.140 --> 01:01:49.200

Julie Sweetland | FrameWorks (she/her): That over emphasizing the problem doesn't work.

383

01:01:49.500 --> 01:02:00.900

Julie Sweetland | FrameWorks (she/her): We need the public out of the conversation we don't dwell on the problem that fail to offer a sense of solutions often we do this, out of a desire get people to care to motivate them to take action before it's late.

384

01:02:01.140 --> 01:02:15.960

Julie Sweetland | FrameWorks (she/her): But, as it turns out crisis framing doesn't work that way for the most part it causes apathy, the public has a finite pool of worry and a constant atmosphere of crisis evaporates it bit by bit, it can also ignite.

385

01:02:16.740 --> 01:02:27.750

Julie Sweetland | FrameWorks (she/her): garner a click on a headline but it doesn't translate into support for longer term bigger picture solutions which are exactly the solutions we need to advance health equity.

386

01:02:28.350 --> 01:02:31.110

Julie Sweetland | FrameWorks (she/her): Right so that's the effect of doom and gloom framing for the public.

387

01:02:31.890 --> 01:02:41.790

Julie Sweetland | FrameWorks (she/her): When it comes to collaborating with other sectors, if we adopt an alarmist tone and only emphasize the urgency of the matter, it may actually turn.

388

01:02:42.090 --> 01:02:57.450

Julie Sweetland | FrameWorks (she/her): Potential collaborators away if you don't offer sufficient context or helpful explanation crisis messages have been shown to trigger suspicion degree, trust and feed fatalism, among other sectors like housing and education, all of which makes.

389

01:02:58.050 --> 01:03:06.180

Julie Sweetland | FrameWorks (she/her): successful collaboration far less likely another way to think about this is if your story is all empire and no rebellion then there's no.

390

01:03:06.690 --> 01:03:18.990

Julie Sweetland | FrameWorks (she/her): reason for the public to tune in if you came for the nerdy social science, I hope, you'll stay for

the even know your science fiction references, so we want to to really avoid prices framing so.

391

01:03:20.190 --> 01:03:22.740

Julie Sweetland | FrameWorks (she/her): When we do this it's important that we.

392

01:03:24.240 --> 01:03:33.870

Julie Sweetland | FrameWorks (she/her): Have we're going to offer and always offer explanations of promising or proven approaches it's it's it's important that we think about doing those.

393

01:03:34.500 --> 01:03:44.730

Julie Sweetland | FrameWorks (she/her): approaches offering highlighting approaches that our collective so little picture individual focus solutions aren't the best frame forward when we're talking about health equity issues.

394

01:03:45.030 --> 01:03:59.490

Julie Sweetland | FrameWorks (she/her): When we use data to point out a big widespread problem but don't include the possibilities for improving situation we just said, we leave the public even fatalistic like it's two problems too big to fix and the other reason for us to.

395

01:04:00.630 --> 01:04:09.390

Julie Sweetland | FrameWorks (she/her): To focus on collective solution solutions that work at the Community state private or national level is that the public simply doesn't hear about them as often.

396

01:04:10.020 --> 01:04:20.820

Julie Sweetland | FrameWorks (she/her): We are as American society we get a steady diet of kind of do you fix you news, you can use kind of information and we get much less exposure to.

397

01:04:21.810 --> 01:04:34.260

Julie Sweetland | FrameWorks (she/her): ideas about how to make society go better at a specific level, and so, simply because the public the public cannot support them if they don't know about them and so Lifting these collective solutions up is really important.

398

01:04:34.620 --> 01:04:42.510

Julie Sweetland | FrameWorks (she/her): And then, finally, we have seen that emphasizing collective solutions focuses people on the policy context.

399

01:04:45.210 --> 01:04:45.810

Julie Sweetland | FrameWorks (she/her): Pardon me.

400

01:04:48.270 --> 01:04:52.140

Julie Sweetland | FrameWorks (she/her): Which is part of part of.

401

01:04:53.640 --> 01:05:03.510

Julie Sweetland | FrameWorks (she/her): Pushing against stigma and blame and so that is obviously part of what we're trying to accomplish as we start to talk about the health problems that affect.

402

01:05:03.780 --> 01:05:25.080

Julie Sweetland | FrameWorks (she/her): marginalized communities so i'm going to show an example of messaging that really I think does an okay job of lifting up collective solutions, and this is something from our dear friends at the CDC that frameworks advised on this is about I don't know 75 seconds long, or so it is a.

403

01:05:28.260 --> 01:05:42.780

Julie Sweetland | FrameWorks (she/her): explainer about the impact on the health impacts of changing climate and I want you to listen watch it listen watch and listen to it look for the solutions and also think about how you would feel after watching this if the solutions weren't there.

404

01:05:46.020 --> 01:05:50.610

A changing climate also means more frequent and more severe storms and flooding.

405

01:05:51.180 --> 01:06:02.430

That puts people at immediate risk of being injured or killed by debris down power lines for floodwaters after a severe storm or flooding event possible health risks are contaminated food or drinking water.

406

01:06:02.910 --> 01:06:13.200

Bacteria viruses and toxic chemicals and floodwaters mold and difficulty accessing healthcare services like emergency help

prescribed medications and supplemental oxygen.

407

01:06:13.620 --> 01:06:19.980

In these events older residents, people with disabilities and lower income households are more at risk, they may.

408

01:06:20.850 --> 01:06:28.830

All have a harder time fleeing from a storm and may face more health risks if they can evacuated one thing we often miss the mental toll.

409

01:06:29.250 --> 01:06:35.610

first responders who witness countless tragedies and residents who are forced to flee are more vulnerable to anxiety and depression.

410

01:06:35.970 --> 01:06:44.010

Even those who have no history of mental illness, to prepare communities can find out which neighborhoods people and resources are most at risk.

411

01:06:44.370 --> 01:06:54.660

upgrade infrastructure such as roads and sanitary sewer systems and educate residents on how to stay safe during and after an extreme weather event, such as avoiding driving in flooded areas.

412

01:06:55.920 --> 01:06:57.090

Julie Sweetland | FrameWorks (she/her): Right so.

413

01:06:58.380 --> 01:07:07.830

Julie Sweetland | FrameWorks (she/her): Imagine right if we had just if they had just stopped with the oh my gosh and get electrocuted and I can have all of these, for you know health problems, happen to me after this.

414

01:07:08.460 --> 01:07:18.240

Julie Sweetland | FrameWorks (she/her): Without those collective solutions without some nod to solutions right, I think this would have been a highly ineffective and in fact counterproductive communication.

415

01:07:18.780 --> 01:07:25.740

Julie Sweetland | FrameWorks (she/her): But with the solutions that are lifted up that happened at the level of infrastructure right, we

need to upgrade infrastructure.

416

01:07:26.370 --> 01:07:35.400

Julie Sweetland | FrameWorks (she/her): You know, monitor the situation and the society needs to take responsibility right for clear, effective public health communications in a crisis.

417

01:07:36.090 --> 01:07:43.230

Julie Sweetland | FrameWorks (she/her): Those are at the those are commensurate there at the level right of kind of the scope of the problem that was articulated.

418

01:07:43.500 --> 01:07:59.070

Julie Sweetland | FrameWorks (she/her): And because the issues of health equity are structural they are about racism and homophobia and ageism and able ISM right, those are big society heavy heavy really kind of structure that that shaped the way we experience the world.

419

01:07:59.850 --> 01:08:09.840

Julie Sweetland | FrameWorks (she/her): We need to have solutions that are also Pasty weighty and at the level of the problem we've articulated so effective solutions frames.

420

01:08:10.890 --> 01:08:20.100

Julie Sweetland | FrameWorks (she/her): In general, but I think, even more so when it comes to topics touching on disparities, need to be collective right Community level amenable to policy.

421

01:08:20.550 --> 01:08:30.720

Julie Sweetland | FrameWorks (she/her): They should be concrete, specific descriptive possible to visualize and graph right so on that example I just showed, there was a image right that you could put together right to show what those were.

422

01:08:31.290 --> 01:08:37.590

Julie Sweetland | FrameWorks (she/her): They need to be seen as as within reach right, not necessarily easily within reach, but but not, you know, on the moon.

423

01:08:38.130 --> 01:08:44.520

Julie Sweetland | FrameWorks (she/her): These are, these are feasible realistic, a lot of that is as much of your tone right about being

very pragmatic about what we can do.

424

01:08:45.000 --> 01:08:49.020

Julie Sweetland | FrameWorks (she/her): That anything else but but describing them in a way that makes them seem doable.

425

01:08:49.590 --> 01:09:02.730

Julie Sweetland | FrameWorks (she/her): commensurate which i've already talked about, and then finally clear phrase and plain language that doesn't require public health expertise to understand, so this one, I will put in my daily plug for plain language, which is a.

426

01:09:03.810 --> 01:09:15.210

Julie Sweetland | FrameWorks (she/her): hard for me i'm a word nerd or just a nerd in general as i've already revealed and using i'm getting out of the academic or research language takes work it takes effort but it's absolutely possible and the next.

427

01:09:16.260 --> 01:09:26.880

Julie Sweetland | FrameWorks (she/her): slide i'll show you some examples that folks in the field of helps me with So these are different solutions of different health equity topics that.

428

01:09:27.270 --> 01:09:39.210

Julie Sweetland | FrameWorks (she/her): had been worked to be clear, they get at right, the issue of disparities, not just overall improvements are tailored in some way to to a specific.

429

01:09:40.710 --> 01:09:56.160

Julie Sweetland | FrameWorks (she/her): Eliminating a specific type of disparity or a source of disparity, but they are plain language, so this one started out with comprehensive smoke secondhand smoke workplace protections, but we can make all workplaces smoke free with no exceptions.

430

01:09:57.210 --> 01:10:02.040

Julie Sweetland | FrameWorks (she/her): Restrictions on retailer density and point of sale advertisements can be.

431

01:10:02.550 --> 01:10:10.110

Julie Sweetland | FrameWorks (she/her): limiting the number of stores that can sell tobacco and given neighborhood and that cuts down the

advertising people see for these harmful products.

432

01:10:10.740 --> 01:10:18.360

Julie Sweetland | FrameWorks (she/her): Instead of talking about medicaid including medicaid coverage expanding extending medicaid coverage to cover oral health.

433

01:10:19.140 --> 01:10:24.150

Julie Sweetland | FrameWorks (she/her): really talking about all types of health insurance, we can make sure they all treat oral health as part of overall health.

434

01:10:24.420 --> 01:10:37.050

Julie Sweetland | FrameWorks (she/her): And we can build incentives for preside providers to accept the plans, the lower income people use, and I think this one started off as reimbursement for universal clinical streaming.

435

01:10:37.650 --> 01:10:51.930

Julie Sweetland | FrameWorks (she/her): But let's let's let's get the issue of kind of input of implicit bias in there, so to prevent that from affecting the healthcare people get it, we can set up routines and remind doctors and nurses to ask every patient every visit about health issues that are important to catch early.

436

01:10:53.040 --> 01:11:00.660

Julie Sweetland | FrameWorks (she/her): And instead of talking about cohort based prenatal care for priority populations.

437

01:11:01.260 --> 01:11:13.170

Julie Sweetland | FrameWorks (she/her): We can talk about offering programs that appeal to different types of expecting moms to get the care that they need, and the way they need it and we all get the benefit of healthier pregnancies birth babies and bombs so just an example of.

438

01:11:13.860 --> 01:11:25.980

Julie Sweetland | FrameWorks (she/her): A thinking about being convincing in terms of size, the incommensurate in terms of i'm talking about this in terms of disparities and need to offer solutions that target health disparities, but being very clear, and doing so.

439

01:11:27.270 --> 01:11:38.370

Julie Sweetland | FrameWorks (she/her): All right, i'm gonna skip past your into the the final point here, which is to Center explanation, so we often see communications that run into this type of problem.

440

01:11:38.910 --> 01:11:52.080

Julie Sweetland | FrameWorks (she/her): Where we are very good at pointing out are predictors are associated characteristics outcomes and they get outcomes, but we skip over step two and explaining how a population is connected to a problem.

441

01:11:52.560 --> 01:12:05.370

Julie Sweetland | FrameWorks (she/her): What is the mechanism that's making this happen, and that is important but that's the place where intervention makes a difference we don't want to fix the people who want to fix the process, the practice or the you know the problem of the connector there.

442

01:12:06.030 --> 01:12:09.090

Julie Sweetland | FrameWorks (she/her): So let me give you an example of what that might look like.

443

01:12:09.630 --> 01:12:16.680

Julie Sweetland | FrameWorks (she/her): So often, we will communicate like this, where we will search right that a disparity exists and then it's a problem.

444

01:12:16.980 --> 01:12:29.940

Julie Sweetland | FrameWorks (she/her): And it's true just very zoom exist and they are a problem, but if we just say you know the negative effects of problem that are particularly likely to affect groups y and Z, and this is because of.

445

01:12:30.750 --> 01:12:39.450

Julie Sweetland | FrameWorks (she/her): The result of discrimination which comes from our legacy in our history in this, we have seen there's not a lot of room for the public to see where we can change.

446

01:12:39.810 --> 01:12:50.460

Julie Sweetland | FrameWorks (she/her): An alternative is to explain a particular mechanism, a causal pathway at work so on this particular study that we did we tested it against something that was more like this.

447

01:12:50.790 --> 01:12:57.090

Julie Sweetland | FrameWorks (she/her): Banks are more likely to give subprime loans to black and Latino applicants and whites at the same credit score.

448

01:12:57.420 --> 01:13:06.180

Julie Sweetland | FrameWorks (she/her): unfavorable payment and interest terms, increase the risk of foreclosure which then brings down property values and makes it hard for people to sell or improve the home.

449

01:13:06.420 --> 01:13:19.560

Julie Sweetland | FrameWorks (she/her): And this helps to explain why people of color are more likely to live in neighborhoods where most people have low incomes right, so instead of saying that the this group is in this situation.

450

01:13:19.920 --> 01:13:32.670

Julie Sweetland | FrameWorks (she/her): which leaves a lot of room for people to blame that route or assume that we can't really change that situation, an explanation shines a light on the place where intervention would make a difference and we've seen that testing those two things head to head.

451

01:13:34.620 --> 01:13:45.990

Julie Sweetland | FrameWorks (she/her): Compared to assertion assertion just saying, the first thing has very little effect on people sense that concentrated poverty is a systemic issue, people said no it's just about people not working hard enough.

452

01:13:46.260 --> 01:13:50.460

Julie Sweetland | FrameWorks (she/her): They did not believe that policy change would make a difference, a very low efficacy.

453

01:13:51.090 --> 01:13:58.620

Julie Sweetland | FrameWorks (she/her): And they did not we're not agree with the idea that discrimination has a role in explaining contemporary racial disparities.

454

01:13:58.950 --> 01:14:04.710

Julie Sweetland | FrameWorks (she/her): But with that with that

explanation, we can see a very different type of response for the public.

455

01:14:05.250 --> 01:14:10.290

Julie Sweetland | FrameWorks (she/her): So that what this says to me is that the challenges in talking about health equity.

456

01:14:10.650 --> 01:14:30.210

Julie Sweetland | FrameWorks (she/her): are about how people think, but they are also about the how we talk about these issues and we have as change makers I think responsibility to explain more and explain these issues in a way that open up audiences to saying yes, this is a systemic issue, it is about you know the.

457

01:14:31.350 --> 01:14:35.070

Julie Sweetland | FrameWorks (she/her): biases that are built into our society, and we can do something about it.

458

01:14:36.060 --> 01:14:43.590

Julie Sweetland | FrameWorks (she/her): So to do that, that technique we call that an explanatory chain, and this is, you know the technique that's actually originated in public health.

459

01:14:43.920 --> 01:14:49.650

Julie Sweetland | FrameWorks (she/her): But you clearly lay out a cause and effect sequence, to make sure there's a real tight logical flow right it's not.

460

01:14:49.890 --> 01:14:59.160

Julie Sweetland | FrameWorks (she/her): A historical segregation, to concentrate in Poverty Day right there's a kind of a sense of what affects what lots of causal transition words this helps to explain why.

461

01:14:59.430 --> 01:15:12.600

Julie Sweetland | FrameWorks (she/her): What happens in that case is this leads to, and when we do that, we have seen in multiple studies that we've conducted a framework that can up to double the level of support for good policy when compared with near description.

462

01:15:12.990 --> 01:15:22.200

Julie Sweetland | FrameWorks (she/her): So let me show you this on a

particular health equity topics, so you saw this first sentence already, then you asked too many women are suffering from pregnancy complications.

463

01:15:22.590 --> 01:15:31.320

Julie Sweetland | FrameWorks (she/her): And then lots of statistics that really show and assert that this is a problem here, lower than all other developed countries, some women are more at risk than others.

464

01:15:31.500 --> 01:15:38.850

Julie Sweetland | FrameWorks (she/her): Black women are three to four times more likely to die from pregnancy related causes and women in southern States also have an issue.

465

01:15:39.060 --> 01:15:49.620

Julie Sweetland | FrameWorks (she/her): So this is showing that it proves it's raised approve this class and and and that, but it has not given us anything about why this is a whole lot of hoo hoo hoo.

466

01:15:49.920 --> 01:16:03.390

Julie Sweetland | FrameWorks (she/her): And zero how how how so when we explain we open people up to seeing where we could make a difference, so here's an explanation so we're failing to manage these complications One reason is implicit bias.

467

01:16:03.780 --> 01:16:15.390

Julie Sweetland | FrameWorks (she/her): I explained that, like all of us, health professionals absorbed stereotypes that affects their decisions, for instance, the stereotype of the strong black woman can be doctors to minimize black patients concerns about pain.

468

01:16:15.630 --> 01:16:26.490

Julie Sweetland | FrameWorks (she/her): And miss opportunities to address problems before they get too bad and that's one reason why black women are three to four times more likely, so now we have seen a place where people can intervene.

469

01:16:27.300 --> 01:16:42.360

Julie Sweetland | FrameWorks (she/her): And also just for I know implicit bias is not the only reason this happens, I do want to say that it's better to explain one thing, well then to list all the factors that do contribute again because people have to when people

understand the issue, they are more likely.

470

01:16:42.870 --> 01:16:49.350

Julie Sweetland | FrameWorks (she/her): To take action, the examples i've shown have been a little lengthy, but they don't have to be.

471

01:16:49.770 --> 01:16:55.050

Julie Sweetland | FrameWorks (she/her): here's a nice, I think this is maybe 30 words and it gets in a priority population.

472

01:16:55.350 --> 01:17:06.360

Julie Sweetland | FrameWorks (she/her): It gets in a causal chain So even if you don't lavatory chain, even if you don't smoke, you can still be exposed through your events doors and windows and even gets in a collective civic solution.

473

01:17:06.570 --> 01:17:16.410

Julie Sweetland | FrameWorks (she/her): Not just an individual solution but talk to your landlord about making your building entirely smoke free so just just know we could do this in short context.

474

01:17:17.280 --> 01:17:26.760

Julie Sweetland | FrameWorks (she/her): Right so in terms of the explanations that we have seen work well on equity issues, instead of just leaving out the responsibility or how things work.

475

01:17:27.570 --> 01:17:30.420

Julie Sweetland | FrameWorks (she/her): include one of these causal pathways right that.

476

01:17:31.140 --> 01:17:41.820

Julie Sweetland | FrameWorks (she/her): Some Americans are protected in some way from a health risk and others aren't so really pointing again at the gaps in the system, the vulnerabilities that systems are creating not the people who are vulnerable.

477

01:17:42.600 --> 01:17:55.020

Julie Sweetland | FrameWorks (she/her): really talking about the role of of bias and poverty, particularly in that it increases stress, which can both trigger health problems and exacerbate other health problems.

478

01:17:56.460 --> 01:17:57.720

Julie Sweetland | FrameWorks (she/her): caused by other exposures.

479

01:17:58.290 --> 01:18:10.200

Julie Sweetland | FrameWorks (she/her): To talk about unjust and unfair practices if they've caused harm in the past it's really important to connect it tightly to what's happening today don't jump over history but also don't do a long jump on history from.

480

01:18:10.470 --> 01:18:19.800

Julie Sweetland | FrameWorks (she/her): From you know from a history of segregation to today, but really show how there's a continuity in redlining in the past and being discrimination in the present right so.

481

01:18:20.160 --> 01:18:30.240

Julie Sweetland | FrameWorks (she/her): spell it out for folks, and that is very effective and talking about how implicit and explicit biases built into systems that shape the experiences and some groups.

482

01:18:30.570 --> 01:18:40.650

Julie Sweetland | FrameWorks (she/her): And then really pointing to the role of industry, and particularly and how they sacrificed some neighborhoods for marketing with harmful products this proved to be very effective in the tobacco movement in general.

483

01:18:41.220 --> 01:18:51.900

Julie Sweetland | FrameWorks (she/her): Is been shown in our recent testing effective on tobacco related health disparities, but you can also extend it to to fast food junk food other other sorts of health.

484

01:18:53.400 --> 01:19:03.330

Julie Sweetland | FrameWorks (she/her): So to sum up explanation you've heard the phrase no taxation without representation as a as a resident of Washington DC I see that on our.

485

01:19:03.960 --> 01:19:08.760

Julie Sweetland | FrameWorks (she/her): license plates every day here's the framing version know associations, without explanations.

486

01:19:09.420 --> 01:19:18.990

Julie Sweetland | FrameWorks (she/her): You know notice no naked numbers but also know, associations, without explanations really again what affects what How does that happen not just doesn't happen to.

487

01:19:19.740 --> 01:19:32.700

Julie Sweetland | FrameWorks (she/her): don't just name drop the past it's important to show to point to history but show how it shows up today by giving contemporary examples of unfair or unjust practices and as the great Lin Manuel Miranda once said.

488

01:19:33.120 --> 01:19:41.340

Julie Sweetland | FrameWorks (she/her): list less explain more think that's how that went lists are not effective ways to get people to understand, again, where we would intervene.

489

01:19:41.550 --> 01:19:50.970

Julie Sweetland | FrameWorks (she/her): They can have the counter intuitive factor counterproductive effect of making field people feel like oh my gosh, the problem is so big if you're saying all the things that are contributing to a problem.

490

01:19:51.870 --> 01:20:04.200

Julie Sweetland | FrameWorks (she/her): But, but more importantly, that people just don't remember them people don't think unless they think and how does that work what affects what they think and stories about how the world works and so telling giving them those stories is really critical.

491

01:20:05.610 --> 01:20:13.920

Julie Sweetland | FrameWorks (she/her): Alright, Carmen I think I have packed in as much training into this 90 minutes as I can, I want to know what wasn't clear what people think, and then.

492

01:20:14.940 --> 01:20:16.830

Julie Sweetland | FrameWorks (she/her): So what's come up in the chat.

493

01:20:17.610 --> 01:20:27.000

Carmen Nevarez: Well, so many issues and i'm going to lead with two questions and then maybe do a scenario for you and then i'll get a chance to look at the last ones.

494

01:20:28.290 --> 01:20:44.670

Carmen Nevarez: there's on the issue of understanding equities, do you find that there's a variance between rural and urban communities and post pandemic do we see any change or any difference in our understanding of equity versus equity.

495

01:20:45.240 --> 01:20:55.020

Julie Sweetland | FrameWorks (she/her): Ah, good questions alright so i'm going to speak to the culture change on contextual change one first we are conducting research that.

496

01:20:55.500 --> 01:21:03.660

Julie Sweetland | FrameWorks (she/her): Using both qualitative and quantitative methods to look at how rapidly culture is changing right now there's a sense that you know kind of with there's.

497

01:21:04.380 --> 01:21:15.540

Julie Sweetland | FrameWorks (she/her): In moments of great disruption change can be accelerated right, and so, how can we take advantage of that is it, and is it happening and we have seen on the issue of.

498

01:21:16.950 --> 01:21:24.990

Julie Sweetland | FrameWorks (she/her): police violence and related issues, people are thinking much more structurally on that issue.

499

01:21:25.800 --> 01:21:37.110

Julie Sweetland | FrameWorks (she/her): We also look at how people are thinking about health, in particular, we have not seen a lot of movement on how people are thinking about health as structural, in fact, we saw that post pandemic.

500

01:21:37.710 --> 01:21:45.750

Julie Sweetland | FrameWorks (she/her): 75 in a forced choice question, this is one piece of a larger study in a forced choice question between.

501

01:21:46.380 --> 01:21:54.210

Julie Sweetland | FrameWorks (she/her): Health is primarily determined by an individual's lifestyle like diet exercise or health is primarily determined by.

502

01:21:54.600 --> 01:22:02.640

Julie Sweetland | FrameWorks (she/her): where a person lives, the

neighborhood where people live 75% of Americans post pandemic still pick the health individualism and that was.

503

01:22:03.480 --> 01:22:17.430

Julie Sweetland | FrameWorks (she/her): Strong in groups, you might think, strong and group that think structurally another issue, so that was in the high 60s for democrats it wasn't about that health individualism was in the high 60s for African Americans in the high 60s for.

504

01:22:18.960 --> 01:22:32.040

Julie Sweetland | FrameWorks (she/her): People ages 18 to 34 I think was the demographic there so black lives matter is a relatively you know the relatively better job of getting people to think structurally than public health.

505

01:22:32.520 --> 01:22:41.070

Julie Sweetland | FrameWorks (she/her): Is one takeaway from that in recent and in this in this moment, so I don't think we can take it for granted that people are thinking structurally we've gotten.

506

01:22:41.490 --> 01:22:54.510

Julie Sweetland | FrameWorks (she/her): Throughout this you know session a lot of questions about does this hold true for everyone right or where are we seeing differences, and those are important and meaningful questions and at frameworks, we take a.

507

01:22:54.930 --> 01:23:05.490

Julie Sweetland | FrameWorks (she/her): slightly different approach, so we are our value that we try to add to a field of practice is the ability for.

508

01:23:05.760 --> 01:23:12.780

Julie Sweetland | FrameWorks (she/her): A lots of folks across the field working in different contexts, to be able to some extent use some shared framing.

509

01:23:13.050 --> 01:23:22.530

Julie Sweetland | FrameWorks (she/her): Because it is only when a large movement common use the shared framing that they see that kind of traction and consistent, you know shaping of public discourse.

510

01:23:22.830 --> 01:23:33.690

Julie Sweetland | FrameWorks (she/her): So we want to offer insights that have relevance, regardless of your audience doesn't mean the audience doesn't matter, it means it's not the research that we offer so i'm not.

511

01:23:35.520 --> 01:23:39.540

Julie Sweetland | FrameWorks (she/her): I would encourage people to take what i'm offering and sharing.

512

01:23:39.810 --> 01:23:47.070

Julie Sweetland | FrameWorks (she/her): that's kind of a baseline and then things that they need to go a little deeper right into where those differences might be among audiences.

513

01:23:47.220 --> 01:23:54.870

Julie Sweetland | FrameWorks (she/her): For a particular issue and how they might activate them differently, therefore, so I can't really speak to is it different where is it different we're in the.

514

01:23:55.200 --> 01:24:09.270

Julie Sweetland | FrameWorks (she/her): We offer kind of what can you assume will happen, no matter which audience you're walking into, and I think a lot of the ideas that I share, we found, these are highly present across audiences that we sometimes assume will be different and they're not.

515

01:24:10.620 --> 01:24:20.190

Carmen Nevarez: Okay, so let me do a quick scenario with you this, I think this is a situation that many have found themselves in this comes from our colleague big alarm vasquez.

516

01:24:21.510 --> 01:24:31.710

Carmen Nevarez: Yesterday I brought up a local to local group of transportation planners engineers and public sector staff who are members of the active transportation network.

517

01:24:32.040 --> 01:24:41.820

Carmen Nevarez: The existence of new racism as a public health crisis resolution with the intent of this of addressing racial disparities injury and premature deaths.

518

01:24:42.210 --> 01:24:52.620

Carmen Nevarez: In our communities after my brief presentation I open the floor for having initial conversation as what does that resolution mean for us in our ATM in our active transportation network.

519

01:24:52.950 --> 01:24:59.130

Carmen Nevarez: I was not surprised that no one from the 26 attendees took the opportunity to provide a reaction.

520

01:24:59.640 --> 01:25:09.840

Carmen Nevarez: I guess, my question is how do I move forward with a group clearly they were uncomfortable with the topic, but I think many of them do recognize the issue, so there you go it's happens to all of us.

521

01:25:11.250 --> 01:25:13.800

Julie Sweetland | FrameWorks (she/her): Ah, I wonder if.

522

01:25:14.970 --> 01:25:17.340

Julie Sweetland | FrameWorks (she/her): If you had asked how can we.

523

01:25:18.420 --> 01:25:27.300

Julie Sweetland | FrameWorks (she/her): do some do take some specific actions to make transportation, a little more fair right or more fair and a little more fair right but.

524

01:25:28.110 --> 01:25:33.270

Julie Sweetland | FrameWorks (she/her): If you ask people to talk about what they thought about creating fairness and justice.

525

01:25:33.930 --> 01:25:49.380

Julie Sweetland | FrameWorks (she/her): Rather than what does this mean for us, I wonder if that would have gotten a more response right more robust response I think when sometimes we ask people if the question is heard of hey how are we going to solve racism.

526

01:25:50.670 --> 01:26:03.450

Julie Sweetland | FrameWorks (she/her): That can feel very daunting but how can we contribute to greater fairness, I think that that can be a little more easier, you know it's more conceivable to make a difference, and so I.

527

01:26:03.990 --> 01:26:16.920

Julie Sweetland | FrameWorks (she/her): don't want to suggest that we hide or avoid saying this is about racism or, this is about homophobia or, this is about ageism or able ISM whatever it is, whatever topic we're tackling and the health equity space.

528

01:26:17.280 --> 01:26:28.320

Julie Sweetland | FrameWorks (she/her): And, but often leading right with that can lead people to a sense of overwhelm and so leading with an aspiration with a value.

529

01:26:29.550 --> 01:26:44.970

Julie Sweetland | FrameWorks (she/her): and asking people to think about specific conceivable solutions they could contribute to because right we don't believe why we're not in the business of supporting perpetuating these these forms of exclusion, I wonder if that would have helped.

530

01:26:46.980 --> 01:26:53.850

Carmen Nevarez: So thank you for that and I just want to apologize to the audience, that of the 67 questions that we didn't get a chance to answer.

531

01:26:55.710 --> 01:27:04.620

Carmen Nevarez: individually that so many of these issues were raised and we tried to get we tried to touch, at least at a light level.

532

01:27:05.670 --> 01:27:15.240

Carmen Nevarez: I want to just ask if we could go ahead and do the wrap up slides and then we'll we'll offer some opportunities for how you can get more.

533

01:27:15.720 --> 01:27:34.590

Julie Sweetland | FrameWorks (she/her): yeah absolutely, so I would love it if our behind the scenes colleagues could share the link to the feedback survey in the chat and I would really ask and encourage people to fill it out, and I take I take my responsibility to to my fellow nonprofit workers very seriously and if.

534

01:27:35.760 --> 01:27:40.380

Julie Sweetland | FrameWorks (she/her): If you if you offer feedback, it will show up in the next presentation.

535

01:27:41.790 --> 01:27:44.580

Julie Sweetland | FrameWorks (she/her): And then over to you, Carmen
Thank you so much for having me.

536

01:27:45.570 --> 01:28:02.580

Carmen Nevarez: Okay, thank you Julie, this was just so good, and clearly this is a topic we're going to have to revisit many, many times really practical and hits on them it's a space that people need a lot of luck for the conversation on so we'll announce to everybody that the national.

537

01:28:03.870 --> 01:28:10.440

Carmen Nevarez: Leadership Academy for the public's health 11th cohort application process is about to open.

538

01:28:10.800 --> 01:28:19.320

Carmen Nevarez: So, if you would visit the end left program page of our website, you can learn more about this we're talking about early August, will be one will put the.

539

01:28:19.890 --> 01:28:29.220

Carmen Nevarez: The application out there, this presentation is brought to you by and laugh, and many of the people I went through all the names that I could.

540

01:28:29.760 --> 01:28:40.470

Carmen Nevarez: Many of you are already familiar with and laugh, we encourage you to to bring others to this table and to try to see how we can build a much larger Community that is working.

541

01:28:40.800 --> 01:28:51.570

Carmen Nevarez: On the very many pressing issues that you have already defined as your issues in and helping to build the skills that you need in order to get where you need to go as a Community, the next slide.

542

01:28:54.090 --> 01:29:12.120

Carmen Nevarez: Okay, so thank you, on Tuesday July 13 we will be talking about communicating in conservative contexts strategies for raising health equity issues effectively, so we hope see you there and I think that is our last slide.

543

01:29:13.020 --> 01:29:13.920

Carmen Nevarez: If there are more.

544

01:29:14.130 --> 01:29:16.200

Carmen Nevarez: Go ahead and flushing but that looks like it's it.

545

01:29:16.650 --> 01:29:17.310

Julie Sweetland | FrameWorks (she/her): Okay, all.

546

01:29:18.810 --> 01:29:20.910

Carmen Nevarez: Right everybody, you are great.

547

01:29:21.930 --> 01:29:23.370

Carmen Nevarez: Julie wonderful job.