



PHOTO: Courtesy SunSmart, The Cancer Council Victoria

# Framing your message

Messages can be about negative outcomes of poor behaviour, or they can be framed using positive modelling of healthy behaviour.

Since the inception of the Ottawa Charter in 1986, health promotion has been based on a series of internationally legislated values surrounding human rights, including the right to equity of access to health services and information.<sup>1</sup> In their

totality, these values emphasise health as a positive concept and seek to empower individuals to increase control over their own quality of life.

There's little getting around it: health promotion is a values-based activity. A trap for health promoters in the development

of their change programs is the assumption that the rest of the community will automatically see the 'rightness' of their goals.

For health promotion experts, tapping into people's values and beliefs in a way that doesn't patronise or alienate

is a crucial part of their work. Whether it's promoting safe sex in the gay community, spearheading a nationwide anti-smoking campaign, trying to change the food-buying habits of poor families, or exhorting us to play it safe in the sun, communicating health messages within culturally specific frames of reference is critical for effective health promotion.

Chris Gill, a foundation member of the Victorian AIDS Council, says that we don't have to delve too far into our nation's history to find examples of conservative values overpowering basic human rights. According to Gill, initial public policy and media responses to the arrival of HIV/AIDS in the early 1980s were "so hostile that they verged on hysteria", with the then head of the Australian Medical Association, Dr Bruce Sheppard, initially calling for quarantine and compulsory tattooing of HIV-infected people,<sup>2</sup> and a Queensland newspaper publishing the headline 'Die deviant die' after three babies contracted the virus from a HIV-positive blood donor.

For the founders of Australia's various AIDS organisations, such mindsets required careful negotiation. Entire cultural value systems had to be challenged, journalists needed to be educated, and new ways of speaking about the virus needed to be invented for at-risk groups such as gay men. In short, the whole issue had to be re-framed and re-contextualised.

As Gill explains, this was no easy task, as competing voices from political and medical groups sought to squeeze out community language: "...for example, in the design of preventative education materials, we'd be getting feedback from doctors saying that we should be talking about 'intercourse' and 'sexual relations'...which were nowhere near specific enough for the kinds of instructions that we were needing to put into detailed materials on risk reduction".

Ultimately, the most effective communication was that which deliberately targeted gay men through culturally specific and proactive language. As Gill notes: "When communicating with the gay male community, it's important to describe in everyday language what people are actually doing or not doing, and that means not using coy aphorisms like 'sleeping with someone'...because in fact, it's not sleeping that transmits the virus."

## Framing and language



In a recent book titled *Don't Think of an Elephant*, George Lakoff makes an important point about the persuasive capacities of language. According to Lakoff, the basic principle behind re-framing a

political issue is not to fall into the trap of using the language of the opposing side.

To illustrate, he points to the demise of former US President Nixon: "When we negate a frame, we evoke the frame. Richard Nixon found that out the hard way. While under pressure to resign during the Watergate scandal, Nixon addressed the nation on TV. He said, 'I am not a crook' and everyone thought of him as a crook. This gives us a basic principle of framing when arguing for the other side: Do not use their language. Their language picks out a frame – and it won't be the one you want."<sup>3</sup>

## Re-framing and audience motivation

For contemporary health promoters, this maxim could hardly be more relevant. As Christina Pollard, Adjunct Researcher at Curtin University, can attest, re-framing specific health issues to match the core motivators of a target audience is crucial: "At all times it is essential for health promoters to understand the contexts in which they are working. Using plain language is very important. We need to speak to people so they can hear [understand] us. It is no use using technical terms that no one understands," she says.

 Tapping into people's values and beliefs in a way that doesn't patronise or alienate is crucial. 

For Pollard, this concept was put to the test during her involvement with the Western Australian FoodCents program.<sup>4</sup> The program was specifically designed to help poor families to put nutritious food on the table. Rather than alienating their target audience with medicalised language about health and nutrition, they re-framed the issue to be about saving money by choosing fresh fruits and vegetables. According to Pollard, this involved taking the time to understand the target audience, and then making sure that their cost-saving recommendations actually worked.

## Positive/negative framing and the notion of risk

For many health promoters, re-framing negative or misinformed beliefs into positive and proactive health messages has been crucial to the success of their campaigns. Often, they have found that simply shifting negatively framed messages into positive ones (such as celebrating the pleasures of 'safe sex' rather than denigrating 'deviant

behaviour) has greatly enabled self-efficacy amongst politically disenfranchised groups. However, as Professor Melanie Wakefield from the Cancer Council of Victoria has discovered, positive message framing is not always the most effective health promotion strategy.

Wakefield and other researchers at the Cancer Council Victoria have found that tapping into nationwide anxieties about risks to family and health can be equally productive. In fact, the deliberate evocation of negative emotions such as fear, dread and sadness has been central to the ongoing success of many of Australia's anti-smoking and sun protection campaigns: "Our research shows that negatively framed testimonials from people who have experienced the consequences of smoking go further in terms of pushing the message of prevention," says Wakefield. "We've found that personalised [negative] messages help make the risks of smoking relevant and understandable."

This approach is certainly evident in a new Quit Victoria television commercial. Unambiguously dubbed the 'bronchoscopy campaign' the 30-second commercial encourages Australians to quit smoking by delivering detailed, multi-sensory information about what lung cancer actually looks and sounds like.

Deliberately graphic and highly emotive, the new ad places viewers in an operating room during a bronchoscopy. Amid the whistling sound of cancerous lungs, and the harrowing gags of a choking patient, audiences are guided, camera-first, through a smoker's airways and shown, first hand, what the risks of smoking actually are.

For today's health promoters, choosing the right approach to a particular message requires a sophisticated understanding of their target audiences' concept of risk and empowerment. As Colin Benjamin, founder of the Roy Morgan VALS project (see next page), and now Director General of Life Be In It, puts it: "With health promotion it's important to remember that message content needs to be adjusted to the mindset of the audience. Health promoters need to ensure that the language and frames being used are relevant to the target market."

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## REFERENCES

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