Creating and Framing the Agenda

Words can make a difference when you are trying to get the public to pay attention to a problem. For years, the Republican Party tried to get the public—and politicians—to do something about the “estate tax.” This was a tax to be paid from an estate when it was passed on to heirs. The Republicans argued that this constituted double taxation on people’s earnings and was unfair on its face. However, the public seemed to associate the word estate with wealthy people and apparently felt that the wealthy had too much money anyway, and maybe they got it from coupon clipping, not real work.

Republican consultant Frank Luntz proposed a simple solution: Call it a “death tax.” This simple word change did much to increase public sympathy. Luntz found in his polls that, although a narrow majority would repeal an inheritance or estate tax, an overwhelming majority would repeal a death tax. Presumably, it seemed really unfair to penalize people for dying (“Interview: Frank Luntz,” 2004).

Social marketers, of course, do not typically play a role in the creation of baseline objective data that can identify important social problems. At later stages, they may suggest data collection strategies that will help advance particular behavior influence strategies. However, they can help move issues up the social agenda. To appreciate the potential for social marketing to have such an upstream impact, it is important to understand how issues go from
being objective data to becoming social problems and then being subject to intervention efforts by a society. This process is called agenda setting, or agenda building (Berkowitz & Adams, 1990). Just how do social issues obtain prominence and gain attention, and where does social marketing fit? In the past, social marketing has primarily been used to try out solutions to social problems. However, different behavior influence challenges appear at different stages and involve different target audiences. Therefore social marketers have much to contribute at earlier points in the process. This means we must learn how to apply our kit bag of concepts and tools to different unique target audiences with different specific behavioral objectives.

First, we need a better understanding of the agenda-setting process.

The Three Agendas

Three types of agendas dictate how any society addresses social problems (Soroka, 2002). First, there is the public agenda. This comprises the general public’s perceptions of what is important and is typically reflected in polls by organizations such as Gallup and the Pew Charitable Trust and in the positions taken by important interest groups and influential leaders. In the 21st century, the public agenda can also be seen in chatrooms or “blogs” (Web logs), employing what McNutt and Boland (1999) call “cyber advocacy.” Second, there is the media agenda—what the newspapers are writing about, the television networks covering, and the talk shows emphasizing. Finally, there is the policy agenda, heavily influenced by political perspectives; views of political leaders; positions taken by political parties; and input from consultants, lobbyists, think tanks, and government bureaucrats.

The three agendas obviously interact. Lang and Lang (1983) call this “a collective process in which the media, government, and the citizenry reciprocally influence one another” (p. 59). Lobbyists seeking to influence the public policy agenda often try to first influence the media and public agenda by going on television or writing op-ed pieces for major newspapers urging people to pay more attention to the problem or advocating a particular solution. On these occasions, the media play a gatekeeper role in controlling the access of specific groups and spokespeople to channels that will broadcast their positions to other agenda setters.

Of course, the media are not necessarily passive. Newspapers and investigative TV shows such as 60 Minutes or Dateline NBC often bring social problems to the fore by both providing factual information and portraying real victims with real consequences. Also, newspaper columnists and editorial page writers regularly take positions and call on legislators or the public to rise up and take action about something they believe to be important.
However, it should be clear that the media do not necessarily influence the public’s priorities. Bernard Cohen noted in the early 1960s that the print media may not be successful much of the time in telling people what to think, but it is stunningly successful in telling its readers what to think about. And it follows from this that the world looks different to different people, depending not only on their personal interests but also on the map that is drawn for them by the writers, editors, and publishers of the papers they read. (Cohen, 1963, p. 13, emphasis in original)

The media can also play a critical role in what Wallack and others call “framing the issue” (Wallack, Dorfman, Jernigan, & Themba, 1993). For example, in the early stages of the HIV/AIDS epidemic, the media portrayed AIDS in the United States as affecting a relatively narrow set of specific, high-risk groups. Only later did it acknowledge that AIDS was a general problem potentially affecting everyone. Today the media—and other leaders—differ in how they have portrayed the AIDS epidemic internationally. Some see it as a tragic human problem, especially for those countries such as South Africa and Zimbabwe, where infection rates are especially high. Others recognize the human dimension but frame the issue as a matter of global political stability and therefore an issue of foreign relations. Former Secretary of State Colin Powell was particularly vocal through the media in urging Americans to see the worldwide AIDS problem as potentially destabilizing and therefore a possible cause of serious domestic consequences for the United States. As he said in a September 2003 speech at the United Nations:

AIDS has left 15 million orphans, and unless we stem the tide, that number will swell to 25 million by the end of this decade. The vast majority of these children are likely to live without emotional support, without the barest of physical necessities, and without any prospects for the future.

Unless we act effectively, these precious children are likely to perish in the same cycle of disease, destitution, despair and death that took the lives of their parents. The appalling statistics do not begin to describe the magnitude of the destruction wrought by AIDS. AIDS is more devastating than any terrorist attack, any conflict or any weapon of mass destruction. It kills indiscriminately, and without mercy.

As cruel as any tyrant, the virus can crush the human spirit. It is an insidious and relentless foe. AIDS shatters families, tears the fabric of societies, and undermines governments. AIDS can destroy countries and destabilize entire regions.

The interaction between the public agenda and the policy agenda can also vary by issue. Polls reflecting the public agenda can have important influences on the political agenda because they signal legislators about what their
constituents seem to want—and what they do not want. Despite politicians’ protestations that they never make judgments based on the latest opinion poll, it is often clear that they do. Politicians want to be reelected, they want to be seen as leaders, and they want to get in front of powerful causes. By sensing the public agenda, they can advance a fourth agenda—their own.

There are other ways in which the public and political agendas interact. Advocacy organizations with large memberships, such as the National Rifle Association (NRA) or AARP, lobby politicians, claiming they are merely conveying what their members want. Sometimes the public makes its wishes known more directly, and legislators realize that they must hurry to get out in front of the parade. In 2003, the U.S. Federal Trade Commission established a national “do-not-call” registry in an effort to reduce the number of intrusive telemarketing calls citizens were experiencing. The telemarketing industry mounted legal challenges to the Federal Trade Commission’s (FTC’s) authority to create such a list, and a judge ruled on September 23, 2003, that the FTC did lack proper authority. Still, 50 million Americans had already signed up for the registry—which would explain why the House and Senate passed legislation the very next day giving the FTC the necessary authority, and President Bush signed it into law the following Monday, September 29 (Mainstream Marketing v. FTC, 2003).

The political agenda also often follows the public agenda because of politicians’ needs for campaign financing. Politicians have to pay close attention to what the polls say and what lobbyists and consultants in the policy community tell them are important issues. Supporting these views can have important impacts on reelections, as money is increasingly the “mother’s milk of politics” (Mutch, 1988).

This last point makes clear that there are not only interactions across the three sets of agendas but interactions within each domain. Within the public agenda domain, various interest groups often claim to be the only ones speaking “for the people” to convince the media or the policymakers that only they are the ones who should be listened to. Influential book authors or prominent nonpolitical leaders write op-ed pieces to try to get others to accept their positions. Coalitions are formed (sometimes among unlikely allies) to increase their influence on the policy agenda. Within the media world, there is some evidence suggesting that there is a synergistic influence among categories. It is often rumored that the major television networks choose stories for the evening news by discovering which issues are given priority by key morning papers such as the New York Times and Washington Post, or what is being talked about by bloggers that day.

A good example of how conflicting agendas form and get played out could be seen in the early years of the HIV/AIDS challenge in New York City at the beginning of the epidemic.
THE NEW YORK CITY AIDS AGENDA

Agendas and their prominence are sometimes affected by preferences among solutions. Chambré (1999) has noted that the two primary publics with the most interest in the AIDS issue in the United States in the 1980s and 1990s had very different preferences for solutions. Gay men wanted better drugs to prevent the spread of AIDS or to minimize the consequences of the disease. The other key population, intravenous drug users and those concerned about them, instead wanted an increase in the number of free needle exchange programs. The relative dominance of each of these solutions shifted back and forth on the policy and public agendas over time, as did the positions of key players.

The two perspectives—those of gay men and those of drug abusers—rose and fell in their general acceptance by the broader public. The gay men’s community sought to increase awareness of the issue and preference for “their” solution through dramatic events and other modes of public advocacy, including picketing and celebrity-stoked fundraising. Their solution was not particularly controversial, although sometimes the tactics used by groups such as the AIDS Coalition to Unleash Power (ACT UP) were viewed as too confrontational and sometimes annoying to potential supporters. Fundamentally, however, arguing for research to find a drug or set of drugs that would cure or at least manage a serious medical condition was well within the “American tradition.” At the same time, homosexual lifestyles were becoming significantly less controversial, especially in New York City, where Chambré’s case study was done. Pushing the “drug agenda” was acceptable and even widely supported. The major impediments were funding and the state of medical science.

The problem for intravenous drug users was very different. First, they had very few organizational skills and little political influence. Their cause had to be advanced by others acting on their behalf. Second, the course of action they were proposing faced significant opposition at various points because it conflicted with other agendas. On the one hand, it competed with agendas that gave higher priority to reducing drug use per se. Needle exchange was seen by many politicians and competing advocacy groups as a tactic that would, at best, keep addicts using their drugs longer and, at worst, would increase the total number of users. Needle exchange supporters also confronted groups that said that this solution, which to a significant degree benefited Hispanic and African American users, conflicted with racial and ethnic agendas.

(Continued)
Many powerful African American leaders argued that, because needle exchange programs typically focused on minority neighborhoods, the programs were stigmatizing African Americans and making drug use a “black problem.” Although they later backed down, these spokespeople were influential enough that when an African American mayor, David Dinkins, was elected in New York City, he decided to halt the needle exchange program for a time.

Clearly, it is important to understand the competition among agendas both within and across domains. Some would argue that it is the public agenda that is ultimately the most critical in sustaining an issue and leading to some attention being given to desired outcomes. The media agenda helps to galvanize interest, shape the debate, and carry messages among interested parties. However, the media’s ultimate attention to its own audience ratings means that most media outlets will abandon a problem area if it does not get “public traction.”

With respect to the other two agendas, public and policy, it is not always clear which will prevail. The policy agenda often progresses parallel to the public agenda because, if the ultimate outcome is mainly a political decision, as we have noted, politicians are reluctant to get too far in front of public opinion; consequently, the public agenda dominates. On the other hand, there are many social problem areas wherein the technical issues are sufficiently great that those in the policy world prevail simply because they know more about the problem and likely solutions.

Public Polls Versus Public Knowledge

How do we track agendas—particularly the public agenda? Daniel Yankelovich has studied agenda setting for more than 40 years, with a particular focus on the role of public opinion polling. Public opinion polls are often taken by politicians and the media as the definitive measure of the public agenda. Polls are often relied on by policymakers for guidance as the latter seek to make change happen. Yankelovich (1991) argues that this reliance is often ill conceived. He says that where public opinion is to be used as a guide for social action, one should recognize several things. First, there is a difference between “mass opinion” and “public judgment.” The former is relatively superficial, inconsistent, and not grounded in any sense of personal responsibility.
Public judgment results when individuals have thought through the issues, understood the action alternatives, and considered the personal sacrifices and other implications of the choices that might be made. In coming to public judgment, there is “more emphasis on the normative, valuing, ethical side of questions than on the factual, informational side” (p. 5).

Second, it necessarily follows that public opinion is not the same as expert opinion, nor are they on the same dimension in the sense that public opinion can be considered simply less-informed expert opinion. Public judgment does have informational content, but it is more than that. It is the result of an evaluation of issues in terms of personal relevance. Yankelovich (1991) makes clear that education or public information campaigns—often proposed by advocates as all that is needed to move issues forward—seldom have the major impacts on public judgment that sponsors hope for. This is because critical social issues are less about facts than about the values and sacrifices in play.

Third, Yankelovich (1991) believes there is a methodological reason that polling ought to be suspect. The way that public polls are undertaken (usually by means of telephone or Internet surveys) means that they will measure mass opinion rather than public judgment. Such measures are not likely to be stable. For this reason, Yankelovich argues that they should not be used as a definitive guide for policy choices, although they can more accurately indicate the degree to which people's attention has been aroused.

**Stages in the Agenda-Setting Process**

Yankelovich (1992) proposes a predictable set of seven stages that transpire as an issue moves up the public agenda from discovery to the point where public judgment has coalesced and the populace is ready for change. The steps he proposes are as follows:

*Stage 1: Dawning Awareness.* This is the stage at which the public first becomes alerted to a potential social problem and perhaps some suggested solutions. The media play an important role here: reporting new data, presenting vivid examples of the situation, and summarizing speeches or position papers alerting the society to the topic.

*Stage 2: Greater Urgency.* This second step in consciousness raising occurs when individual members of the public see some personal implications and are ready to consider some responses.

*Stage 3: Discovering the Choices.* Often at this point, the experts and “policy wonks” will float a number of trial balloons about how to handle the problem. The public will begin to consider these alternatives and evaluate some of the trade-offs to be made with each.
Stage 4: Wishful Thinking. Yankelovich (1992) sees this as a stage at which the public tends to think it can have it all—a tendency he suspects may have grown more common in the last few decades. At this point, the public has not faced up to the hard choices that will have to be made. For this reason, politicians and other experts may be deluded into thinking that the public is ready for action. Yankelovich cites legislators who enacted both caps on costs and higher premiums for Medicare in 1988, based partly on polls that showed that 69% of older Americans would support a program to address the risks of catastrophic medical costs. It turned out that they were unwilling to bear the higher costs once they realized what they would be, and the legislation was repealed 18 months later.

Stage 5: Weighing the Choices. Up until this point, the policy mavens, reporters, and editorial writers have been doing the heavy lifting in terms of figuring out the concrete benefits and costs of the choices. At this stage, however, the public finally becomes engaged, with people thinking through what a new course of action means to them personally.

Stage 6: Taking a Stand Intellectually. This is the point at which the public will have carefully considered the facts at hand and accepted mentally one course of action. This does not mean that the action is accepted yet emotionally. For example, many businessmen in Western democracies—perhaps the vast majority—would argue that women should have the same opportunities to rise to the top of businesses as men. Still, a significant portion of these same men finds reasons why it is not yet time for such a step for specific women, because it runs counter to the men’s lingering preferences for stay-at-home wives.

Stage 7: Making a Responsible Judgment Morally and Emotionally. Yankelovich (1992) says: “Intellectual resolution requires people to clarify fuzzy thinking, reconcile inconsistencies, consider relevant facts and new realities, and grasp the full consequences of choices. Emotional resolution requires that people confront their own ambivalent feelings, accommodate themselves to unwelcome realities, and overcome an urge to procrastinate” (p. 106).

Other researchers have also sought to delineate the stages through which issues move up the broader society’s various agendas. It is not surprising that they do not agree on the number of stages or their contents. For example, Rogers, Dearing, and Chang (1991) studied the media coverage of the AIDS issue in the 1980s and concluded that there were four stages in forming the media agenda: the initial era, during which there was little attention paid to the issue; the science era, during which more attention was paid to assembling the facts around the issue; the human era, during which the issue was personalized with interesting cases and stories; and the political era, during which the focus became what action was going to be taken to address the problem.

The economist and urbanologist Anthony Downs (1972) suggests that a linear model of public attention to specific social problems is not appropriate—the process is not unidirectional. As we noted in the preceding chapter, public interest is often mercurial and often wanes before anything happens at all. The
public gets excited about a topic for a time but eventually becomes bored and moves on to other, “hotter” topics—a phenomenon also found in the media. Downs proposes five stages to this cyclic process.

1. The Preproblem Stage. Problems may well exist for some time before the public becomes interested. To move onto the public agenda, the problem needs what Yankelovich (1992) describes as “awareness and urgency.” Downs (1972) argued that many problems are really less serious by the time the public pays attention to them and cites domestic racism, poverty, and malnutrition in the United States as examples. (On the other hand, such a pattern appears not to have affected recent social problems such as obesity, women’s heart problems, and AIDS, which have constantly risen in prominence over the last decade.)

2. Alarmed Discovery and Euphoric Enthusiasm. At some point, the issue is “discovered.” Downs (1972) argues that, once the public is engaged, there is a period of enthusiasm about finding a solution, emanating from Americans’ inherent optimism and belief that any problem can be fixed with a lot of concerted effort and maybe some new technology. This would parallel Yankelovich’s (1992) “wishful thinking” stage. It describes well the views of the HIV/AIDS problem in the early 1990s, when there was widespread belief that medical technology would soon find a cure.

3. Realizing the Cost of Significant Progress. With time, the population comes to believe that major problems will take a lot of money to solve (worldwide AIDS), major restructuring (air pollution, global warming), or serious individual or public sacrifices (obesity, racial segregation). Downs (1972) suggests that the major feature of this stage is the recognition that there is an unpleasant connection between the problem and solutions that people may have to make. This would be Yankelovich’s (1992) Stage 5: weighing the choices.

4. Gradual Decline of Intense Public Interest. In contrast to Yankelovich’s (1992) model of ever-forward progression of individuals, Downs (1972) argues that the realization that a problem will be hard to solve leads to one of three outcomes. Some people will get discouraged. Some will feel threatened by the solutions and so stop talking about the problem and hope it will go away. Others just get bored. Progress may have been made, and people thus conclude that “it is only a matter of time” before the problem is gone—so they can move on to worrying about other matters. This is certainly a challenge for those concerned about smoking or AIDS in the United States in the early 21st century, as many believe (wrongly) that these problems have been successfully managed. It is not unheard of for campaigns to turn to celebrities to keep up
interest, as when Elizabeth Taylor speaks up about the continuing HIV/AIDS problem in the United States.

5. The Postproblem Stage. Neglect does not mean that the problem has disappeared or that people are not working on it. It is just that the public has moved on to other topics. The homeless are still with us all over the world, and there are programs and systems in place to help them. However, homelessness is no longer a “hot” issue except perhaps in some countries and some cities in the United States. The same is true of high blood pressure, a longstanding focus of social marketing (Andreasen, 1996). Various medical groups are still concerned about high blood pressure, but there is currently more interest in diseases such as diabetes that are a consequence of the growing rates of obesity.

Issues that do not affect large numbers of people or that are largely outside of their everyday existence (homelessness, ozone depletion, Amazon rain forest destruction) tend to be hard to dramatize and sustain. People are not reminded of them in their daily lives. Issues that have solutions that do not seem feasible or that threaten some important benefits to the majority of the public are likely to be ignored. For example, air pollution may not be a public or political priority if it means stiffer gasoline taxes are needed to improve roads or to subsidize public transportation to combat air pollution. For many, tackling air pollution would mean giving up their SUVs—an undesirable outcome for most.

It also should be pointed out that there are issues that are just dull and boring or that affect only small, specialized (sometimes invisible) segments of the population. It is very difficult to get the public aroused about minor corporate loopholes in the tax system, even though these loopholes can mean significant burden shifting from business to the general public taxpayer. On the other hand, there are “evergreen” issues, such as corporate embezzling, road rage, and airline safety, which affect a majority of people and do not require oppressive personal solutions that would punish individuals directly. These issues also make for dramatic media copy.

It is certainly also true that the public often exhibits shortsightedness and callousness when it comes to addressing social problems. People often fixate on their own issues and ignore or downplay others that are globally very important. There are individuals and groups who are very concerned about the extinction of the snail darter or other rare species in distant locations and want foundations and the government to spend resources to do something about them. At the same time, these individuals may ignore abject poverty, child neglect, and crime in their own cities. They can obsess over highly publicized killings involving actors such as Robert Blake or OJ Simpson or potential child abuse by Michael Jackson and ignore the genocidal murder of thousands of Fur, Zaghawa, and Masalit peoples in the Darfur region of Sudan.
Creating and Framing the Agenda

A Proposed General Process of the Social Change Life Cycle

Although there are a great many options to choose among, it is crucial that we agree on a model timeline for the social change process to guide us for the remaining chapters of the book. Borrowing from Yankelovich and Downs as well as—for the first time—from social marketing theory, I propose the progression outlined in Table 2.1.

Moving an Issue Up the Public Agenda

What are the factors that seem necessary if a social problem is to move rapidly through these stages? Obviously, one needs a solid scientific basis and clearly undesirable consequences. Beyond that, various individuals must take action if there is to be a rapid rise in interest.

**Charismatic Spokespeople.** A social problem becomes prominent more rapidly when there are high-profile individuals “out front” on the issues. Preferably these will be individual leaders or statesmen with knowledge, competence, talents, communications skills, political and media contacts, cunning, and charisma. Ralph Nader is such a person, and he has been effective in raising a number of critical social issues, starting with his challenges to the auto industry in the 1960s. C. Everett Koop and David Kessler were key figures in alerting us to the problems of smoking and pushing changes in tobacco policy.

**Leaders of Coalitions.** Solid organizational backing can amplify the spokesperson’s messages. Single groups or a few individuals are unlikely to create major change—although they can be catalysts. Coalitions of forces need to be assembled and brought to bear on the crisis. Grassroots mobilization has been effective in environmental protests on the European continent and domestically on the AIDS issue.

**Foundation Leaders.** For an issue to get traction, studies often must be done, experimental interventions tried out, and conferences and study groups assembled. This is typically the role of foundations and their grant makers. Sometimes they are leaders in forcing societies to come to terms with an issue, as with the Robert Wood Johnson Foundation’s efforts in end-of-life care issues and health insurance for children.

**Government Legislators and Agency Heads.** Major change typically involves legislation and federal or state funding of initiatives. As solutions are identified,
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Table 2.1 Stages in the Life Cycle of a Social Change Issue

<table>
<thead>
<tr>
<th>Stage 1: <em>Inattention to the problem</em></th>
<th>The social problem exists, as evidenced by concrete data or dramatic anecdotes, but it has not yet become anyone’s concern.</th>
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<tr>
<td>Stage 2: <em>Discovery of the problem</em></td>
<td>The problem comes to the attention of individuals or groups (including the media) who think it needs to be addressed. At this stage, initial baseline analyses or measurements will be undertaken. Nuances of the problem will begin to emerge—for example, learning who is most affected by the problem.</td>
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<tr>
<td>Stage 3: <em>Climbing the agenda</em></td>
<td>Activists, advocacy groups, individual politicians, investigative reporters, and nonfiction writers raise the volume on the issue. They marshal even more evidence, produce real victims, and potentially raise the guilt level of those not affected. At this stage, funders and potential interveners begin to find the issue sufficiently important for attention and possible action.</td>
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<tr>
<td>Stage 4: <em>Outlining the choices</em></td>
<td>Analysts and advocates look at the data and consider how the problem might be addressed. Evidence about causal linkages will be important, as will scenarios for possible intervention.</td>
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<tr>
<td>Stage 5: <em>Choosing courses of action</em></td>
<td>This is where debate takes place over the benefits and costs that action and inaction will have on society, victims, and those who have to take action (e.g., donate money, pass laws) if there is to be a solution. Attention will be paid to the efficacy of various solutions. Opposing forces emerge and solidify their positions.</td>
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<tr>
<td>Stage 6: <em>Launching initial interventions</em></td>
<td>Foundations or government agencies put money into programs. Organizations mount pioneering efforts and test alternative strategies and tactics. These will involve both downstream and upstream interventions, in which social marketing can play a major role.</td>
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<tr>
<td>Stage 7: <em>Reassessing and redirecting efforts</em></td>
<td>With most difficult changes, progress is slow, and there are periods of acceleration, deceleration, progression, and regression. At some point, key figures will feel that it is time to take stock of where the problem stands. The outcome may be a reorientation and resurgence of interventions—or it may not.</td>
</tr>
<tr>
<td>Stage 8: <em>Achieving success, failure, or neglect</em></td>
<td>After a number of years, the problem will have found some major solutions or will have proven basically intractable and, in the absence of dramatic progress or new data, will “drop off the radar screen.” The latter may also be the result of new competition from the latest social problem that captures the public’s imagination and drives the “old” problem into the “dustbin of history” (Cohen, 2000).</td>
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government agencies typically provide overall guidance, set strategy, and develop monitoring systems. State and local governments then follow up with tailored interventions and policy changes that fit their own culture and their areas of responsibility. In promoting seat belt usage, the federal government raised the issue and created databases. State governments passed specific regulations; for example, in the use of safety belts and safety seats for children and infants. Local governments then set policies and practices for law enforcement.

Journalists, Editors, News Directors. As I have noted, the media helps us think about social issues. Reporters and commentators can provide barrages of data, carry pronouncements by spokespeople, tell stories of victims, and report on test solutions. They can contribute greatly to changes in social norms. At later stages of the change process, the media are critical in delivering information about what exactly individuals need to do and how they can do it (Backer, Rogers, & Sopory, 1992).

These key figures, in turn, are supported by field investigators, epidemiologists, scientists, survey researchers, and the various staff members and volunteers who eventually get into the trenches to make change happen.

Because it is individuals who must act at various stages to accelerate the agenda building process, there are, therefore, multiple touch points at which social marketing concepts and tools can play a critical role. Social marketers spend their time trying to understand how to induce target audiences to undertake important behavioral changes. Upstream players in the agenda-setting process are no different from downstream individuals who need to adopt better behavioral patterns. Only their issues are different.

Disjunctions and Distortions in the Agenda-Setting Process

The process by which societies move from discovery of a problem to acting on it is not a straight line. Changes in the playing field are common. New data or new players come on the scene. Coalitions spring up and fall apart. Initial interventions turn out to be wrong-headed or lack impact. Scandals occur, and dramatic events reenergize a flagging cause.

Sometimes the reactions to a problem spread well beyond its origins. In 1996, Europe was hit with an outbreak of bovine spongiform encephalopathy (BSE). Throughout the continent, food safety concerns were significantly heightened, as BSE could lead to incurable brain disease in humans. Many thousands of cattle were slaughtered, and exports of beef to the United States and other countries were cut off. The public’s concern over food safety
spread to large-scale chicken farming because of anxiety about the amount of antibiotics routinely fed to hens. The concern for food safety then spread to genetically modified food, or “frankenfoods,” as the Europeans called them.

A tertiary effect of the BSE scare was its effect on people’s confidence in government regulators. In the UK, in the immediate aftermath of the problem, Minister of Agriculture Stephen Gummer was pictured in the media feeding his 4-year-old daughter beef burgers in an attempt to pacify the public. Instead of reassuring consumers, Gummer showed people that public officials charged with food safety was acting with little caution. Officials were further criticized for initially saying that BSE could not be transmitted to humans, which proved to be wrong. This harmed the credibility of UK scientific and agricultural agencies, and the public was said to have felt betrayed (UK Politics: Gummer, 1998). In an attempt to rebuild confidence in Britain’s food, the incoming Blair government established the Food Standards Agency in 2000 (Department of Health, Social Services, and Public Safety, 2000).

Issues can get off-track also if committed activists or other key parties distort the seriousness of a social problem or the efficacy of possible solutions out of ignorance or because it suits their own personal agendas. The media are sometimes complicit in this in their quest for sensational stories that produce ratings but very often exaggerate or distort the facts and skew the public agenda.

A case in point is “road rage.” In a recent book on public fears, Barry Glassner (1999) noted that, in the mid-1990s, a USA Today story described road rage as “a growing epidemic,” citing a AAA report saying that traffic incidents involving personal violence in the U.S. were “up more than 50%.” In actuality, the AAA study reported only 1800 such incidents in 1996. Although this was a 50% growth over the 1129 incidents in 1990, it is hardly an increase that should cause great alarm. Such headlines sell newspapers, however. They can also lead to calls for social change.

Air safety scares follow a similar scenario. Americans and the media seem to think that flying on an airplane is a very risky undertaking. Glassner (1999) reports stories in Time headlined “Air Safety—Under a Cloud” and in USA Today describing “High Anxiety in the Skies.” He also notes that in almost 90 years of airplane travel, fewer than 13,000 people have died in plane crashes. A person is 10 times as likely to die in his or her bathtub as in an airplane crash. However, crashes make for vivid reporting, tragic human interest stories, and sometimes episodes of bravery and sacrifice. Such stories play out over many news cycles and can reinforce a common fear that flying is quite risky.

Distortions also occur because some social change issues are more controversial than others. Uncontroversial problems often get higher prominence than controversial ones. Fighting the challenge of breast cancer is a good example. Breast cancer charity drives are ubiquitous. There are pink ribbons everywhere, regular road races “for the cure,” and dozens of product tie-ins.
Hundreds of companies have created campaigns associating themselves with the problem. Avon has made breast cancer a central social enterprise for its corporation and workforce. Avon’s Breast Cancer Awareness Crusade has become one of the most powerful corporate alliance programs ever created. It raised more than $250 million for breast cancer education and research between 1993 and 2002. The Race for the Cure, which it sponsors, now takes place in 100 cities and three foreign countries (Andreasen & Drumwright, 2001).

These efforts and the media activity and promotion that surround them have led to serious public misperceptions about breast cancer risks and about women’s health in general. A recent study reported by the American Heart Association found that many Americans—both men and women—have come to believe that breast cancer is the number one cause of death in women. The reality is that the number one killer of women is cardiovascular disease. It kills 12 times as many women as breast cancer. Indeed, lung cancer is a worse cancer problem for women, killing almost 60% more women than breast cancer in 2000 (American Heart Association, 2005a).

Similar distortions are present in agendas concerning men’s health. It is the case that many people, men and women, think that men have a greater risk of dying from cardiovascular disease than women. In 1980 that was true to a small degree: 4% more men died from this cause than women. Today, 15% more women die from cardiovascular disease than men. The rate of cardiovascular disease among men has dropped significantly since 1980; it has stayed at the same level or even grown slightly among women (American Heart Association, 2005b). As Dr. Nieca Goldberg, chief of the Women’s Heart Program at Lenox Hill Hospital in New York, notes, this is a direct consequence of distorted public and policy agendas: “When I was in medical school, when instructors referred to heart disease, they showed slides of middle-aged businessmen clutching their chest” (Grant, 2003). This view was reflected in the common image in the media of a person with high cardiovascular risk as an overweight, Type A, corporate male keeling over one day from a heart attack and leaving behind his unsuspecting and now grieving wife and family. Such stories, however, had their desired effect. Men got the message. They learned how to take precautionary measures, and rates went down.

As Dr. Goldberg points out, however, until barely a decade ago, very little attention was paid to the problem in women, and very little research was done. Women today are unaware that their symptoms can be different from men’s, and often they do not realize they are having an attack when it takes place. Similarly, doctors trained many years earlier and family members are less likely to recognize a female heart problem. They may not understand the risk factors that, for example, lead to a rate of cardiovascular death among African American women that is 50% higher than that of white women (American Heart Association, 2005c).
Fortunately, as a result of the actions of many women’s health groups, research centers, and physicians, both the public and policy agendas on breast cancer and heart disease are shifting. As a result of these shifting (many would say corrective) changes in public awareness and priorities, the National Institutes of Health (NIH) introduced the Women’s Health Initiative (now in its follow-up phase), a major 15-year research program to address the most common causes of death, disability, and poor quality of life in postmenopausal women—cardiovascular disease, cancer, and osteoporosis (Women’s Health Initiative, n.d.).

### Framing Social Problems

As we have noted, objective facts are only the starting point for the emergence of any issue on the social scene. The issue then rises or falls on the various agendas, depending, in part, on the motives and interests of the various players (a point we shall return to in later chapters). Objective facts are only raw data until they are given interpretation. The role of many organizations and individuals in the agenda-setting process therefore becomes one of “fact interpreters.” For those organizations and individuals with a particular preference for certain outcomes, the process of interpretation becomes closer to what politicians call “spin.”

The term *spin* became common during the presidential debates in the 1970s and 1980s, when observers noted that perceptions of who “won” a debate were less a matter of what went on in the debate itself than on how others described it after the fact. This insight led to each party assigning “spin doctors” to buttonhole reporters in the “spin room” after the debates to offer the case as to why their side won. The task of the spin doctor was to take the raw data of the actual debate—words, tone, logic, appearances—and interpret them in ways favorable to his or her candidate.

The more neutral academic term for “spinning” is *framing*. A frame is a context offered for interpreting a set of data. Different people will interpret the same set of facts—frame them—in different ways, for one of two reasons. Sometimes (as with spin doctors), they wish others to adopt their frame because it furthers their own policy agenda; they want to spin the data. Sometimes, however, they frame the facts differently because the facts come to them from different perspectives. Take, for example, the data presented in chapter 1 on U.S. income inequality. Liberals would see the data as evidence of the growing disparity between the rich and the poor. They would say that the data clearly show that there are significant imperfections in the economy, corporate America, and the educational system that are biased to benefit those who are already well-off and properly connected and leave behind those who are not so socially well endowed. Their frame of comparison is other countries, such as Finland, Belgium, and Canada, which have done much more to make sure that those at
the bottom end of the income spectrum are not so badly disadvantaged. The liberal advocates then call for new social programs to reduce the disparity.

On the other hand, those with a conservative perspective would employ a “relative change” framework, pointing to the evidence on dramatically increased per capita spending power for all households and saying that the poorest citizens are really better off. They might also argue that the growing disparity is good news. It is evidence that, in the United States, self-reliance pays off: that those who got good educations, learned the right job skills, and got into growth industries saw high payoffs. They would say that the data show that the free market system really works well. Those who are in the bottom 20th percentile simply need to pull up their socks and do what it takes to succeed. They need to become more self-reliant.

There are other possible “spins” for the same data. Those in the middle of the liberal-conservative spectrum might step in and suggest that, although the data may be reasonably optimistic, one should look beyond “top line” numbers. For example, one might accept the conservative frame and note that the per capita spending power of the poor has actually improved but look further into the data to see whether some subpopulations are worse off in absolute terms between 1970 and 2000. What has happened to the per capita incomes of African Americans or Hispanics? What about seniors? Are there regional differences that leave some states like Mississippi or Louisiana farther and farther behind? Are the folks in rural areas worse off? How about single mothers? The issue here would not be “is there general inequality?” These partisans would argue that the relevant frame is intergroup comparisons—whether some groups are falling behind as others are getting ahead.

Different framing results not only in different interpretations of data but in the ranking of social problems and in the solutions proposed for problems we might care about. Simple labels for social problems can have powerful impacts on the debate about solutions. Consider some of the current hot topics debated in America in the 21st century. Is the issue about

- Gun control or gun safety
- “A woman’s right to choose” or “protecting the rights of the unborn”
- Partial birth abortion or late-term abortion
- Urban sprawl or urban growth
- Climate change or global warming

Gun ownership is a constructive example. In his award-winning documentary film Bowling for Columbine, social critic Michael Moore pointed out that annual gun-related deaths in the United Kingdom are 165; in Canada, 68; in Australia, 65; but more than 11,100 in the United States (Moore, 2002). Many people, including Moore, use such data to frame an argument that other countries have learned that gun control is the solution to the problems of
crime, spousal abuse, and accidental home shootings. On the other hand, groups such as the National Rifle Association frame the data as positive evidence that individuals in the United States are much better at taking responsibility for their own defense. The NRA also sometimes frames the issue as one of conflicting rights. Members agree that there are “too many” gun deaths in the United States but that any government effort to regulate gun ownership is an infringement on another right guaranteed by the U.S. Constitution: the right to bear arms. In their framing, the value of supporting the Constitution dominates the concerns of those who want less gun ownership and use. Regulation, in this view, would create a different social problem (not adhering to the Constitution) that is more serious than the social problem of what some see as excessive gun deaths.

Objectivists Versus Constructivists

The presence, importance, and dynamics of a social problem can be determined by how data are framed. The structuralist or objectivist approach would argue that a fact is a fact, and although one can pick and choose data, the data are real and just need interpretation. They argue that social problems are real and concrete. They can be measured, for example by assessing the current status of something against some ideal or reasonable standard. This is what the Department of Health and Human Services is doing with Healthy People 2010. At the Environmental Protection Agency (EPA), unhealthy air is always determined by comparing scientific measurements against a standard of “unhealthy” defined in EPA regulations.

Constructivists, on the other hand, view social problems as something that a social system contrives or, more narrowly still, that a specific group or agency defines (Spiro, Feltovich, Jacobson, & Coulson, 1991). For example, the EPA air quality standard has six components. One of these defines unhealthy levels of particulate matter in the atmosphere, a standard based on particles that are 10 microns in size. In 1997, the EPA added a daily and annual standard for smaller particles of 2.5 microns in size. The latter was added to monitor finer particles that can penetrate the lungs of children and elderly people suffering from asthma, chronic bronchitis, and other respiratory and circulatory problems. The effect of this change was that the EPA “created” a new social problem for cities that did not meet the new standards. Not only did this new use of existing data create this new problem; the EPA forced cities and corporations to act on it by force of law.

Even if the standard is agreed to, the way data are presented can affect how serious someone perceives the problem to be. Consider the following alternative ways of describing malaria as a worldwide social problem. Which version is likely to create the highest motivation to act?
UNESCO estimates (in 1997) that there are 300,000 to 500,000 cases of malaria around the world.

Ninety percent of the world’s malaria cases are found in one region, sub-Saharan Africa.

One million children die of malaria each year.

Children represent half of all malaria deaths each year.

A child in sub-Saharan Africa dies of malaria every 30 seconds.

Which of these frames makes the problem seem most serious—more worthy of the attention of the world community than other health or economic problems? Many readers would agree that the framing implicit in the fifth statement makes the problem much more serious than the routine presentation of facts in the first statement. However, all the statements are ways of framing the same reality.

This example also suggests that problems can seem greater or smaller depending on who is portrayed as the victim. The degree of vulnerability (and size) of the group facing a social problem is often a good indicator of the degree to which a social problem will receive attention. The UN defines vulnerability as “a state of high exposure to certain risks, combined with a reduced ability to defend oneself against those risks and cope with their negative consequences” (United Nations Economic and Social Development, 2001).

Historically, children and the disabled have met this test. However, labeling other groups as vulnerable may be specific to a particular time and locality. Thus the elderly may be seen as vulnerable, but in some cultures the standard for “elderly” may be people over 70 and in others it is those over 50. In some cultures, immigrants are a vulnerable group. In other cultures, they may be seen as a source of social problems, not victims. Some traits, such as being over 70 or being disabled, are unavoidable conditions. Having a language problem may be seen as only a temporary source of vulnerability.

There is also the reality that social problems rise in prominence not because the objective reality has changed but because our expectations have changed. Now we worry about school bus safety, because we expect every child to be bused to school and bused safely. We worry about urban sprawl, because many of us expect to be able to move out to the suburbs and have a crime-free environment. We worry about secondhand smoke, because we think we have defeated firsthand smoke! We worry about the “digital divide” in developing countries because we think that computer literacy is the key to a country’s development in a wired world. We want prescription drug coverage in Medicare because we are now certain that drugs can keep us illness free and robust into old age.

All of these are concerns that did not trouble us 50 years ago.
Finally, it must be noted that frames can also play a role in assigning blame and implicitly pointing to those who should be responsible for fixing the situation. Sometimes one can detect patterns of blaming within groups of players in the agenda-building process. For instance, Nelkin (1987) and Johnson (1989) have concluded that, in general, the media tend to frame issues in ways that do not threaten the existing social system. Western media gatekeepers see problems as the results of ineptitude, accidents, individual chicanery, and unfortunate events. Seldom is it that they lay the blame on broad social systems, such as capitalism or democracy, or argue that the basic approaches of government agencies are at fault.

Of course, a vast array of vocal protest groups frame the issue as exactly the result of the capitalist system, rampant globalization, or American hegemony (Johansson, 2004; Ritzer, 2004). These groups are especially adept at securing media coverage, but media analysis will, typically, not adopt their framing.

A Balanced Perspective

The preceding discussion makes clear that the existence and importance of social problems and the desirability of various solutions are very much influenced by the way in which information is gathered and framed. How, then, do foundation officers, government agencies, corporations, and individual citizens develop perspectives that will allow proper attention to what is really important and to solutions that are likely to make society better? The ideal solution is to find individuals or agencies without what is often called "a dog in the hunt." Government monitoring organizations, such as the Centers for Disease Control and Prevention (CDC), and cross-national agencies, such as the United Nations (UN) and the World Health Organization (WHO), are probably the most reliable sources of raw data that can be assessed when one worries about the spin of activist or doctrinaire organizations. When it comes to assessing possible solutions, one very useful method is carefully setting out alternatives in an unbiased, straightforward manner so that we can choose among them. The latter is a role undertaken by the nonprofit group Public Agenda. To see how they set out alternative frames for 20 or more current issues, see their Web site at http://www.publicagenda.org/issues/issuehome.cfm.

THE PLAYERS

We have seen that social problems rise to prominence on the public, political, and media agendas through a process that involves facts, framing, and interpretations. Social problems become important in Yankelovich’s Stage 2 and get acted upon because specific institutions and individuals bring facts to
light, frame them in specific ways, and find mechanisms to keep the pressure at a high level until something is done about them. These are the players that collectively control the agenda-setting process.

It is important to recognize who they are, because if 21st century social marketing is to play a role in the agenda-setting process, as I argue it should, it is these individuals who would constitute the target audiences for future social marketing campaigns.

MEDIA GATEKEEPERS

As I have noted, the media typically play a very significant role in agenda setting. They provoke interest in an issue through investigative reporting and so-called muckraking journalism (a term contributed by Theodore Roosevelt). History offers many examples in which the media were major forces of social change. Powerful investigative reports by Woodward and Bernstein led to changes in the relationship between the U.S. Congress and the White House. Financial reporters’ exposés of corporate financial mismanagement at Enron and WorldCom led eventually to changes in the way corporations are audited and to the passage of the Sarbanes-Oxley bill regulating financial disclosure. Entire print vehicles, such as *Mother Jones*, and television programs, such as *60 Minutes*, have positioned themselves as prime catalysts in driving social change through investigative reporting. Protess and his colleagues (1991) characterize what they do as “journalism of outrage,” the objective of which is “to trigger agenda-building processes in order to produce ‘reformist’ outcomes—policy changes that promote democracy, efficiency and social justice.”

The media also dramatize and personalize a social problem, to capture the public’s often limited attention span. In the case of Ryan White, the 13-year-old boy who contracted AIDS intravenously and was shunned by classmates, press stories and an ABC movie documenting Ryan’s personal story contributed greatly to the country’s concern about the issue and their enthusiasm for eventual legislative solutions.

A similar case is the passage of versions of “Megan’s Law” in a great many states and current pleas to federalize it. Megan’s Law is named after a 7-year-old Hamilton Township, New Jersey, girl named Megan Nicole Kanka. As numerous press and television accounts detailed, in 1994, Megan was enticed by a two-time convicted sex offender promising her a puppy to enter a neighborhood home, where he brutally raped and murdered her. No one in the neighborhood knew of this person’s history. Megan’s Laws, first passed in New Jersey in the mid-1990s, require the public posting of the names and residences of known sex offenders. A similar federal law was enacted in 1994, named after another child: the Jacob Wetterling Crimes Against Children and Sexually Violent Offender Registration Act. This law requires uniform state registration of sex offenders.
The media also play a role in helping the various participants in a social problem area communicate with each other. Newspapers report on meetings and the results of surveys and policy studies. They give op-ed space or TV talk show time to parties holding various positions on an issue and to the decision makers who must eventually act (or not act). C-SPAN allows citizens to directly observe legislation and conferences on major social issues. Local papers and local TV interview programs help politicians communicate with their constituents about the politicians’ stands and the choices with which they want help.

ADVOCACY GROUPS

Advocacy groups take positions on issues that fit with their broad philosophies or other personal agendas. These include political parties, political action committees, associations such as the National Rifle Association, nonprofits such as AARP and the National Association for the Advancement of Colored People (NAACP), and corporate lobbying organizations such as the Pharmaceutical Research and Manufacturers of America that take positions on issues on behalf of their supporters. Foundations with political agendas, such as those controlled by Richard Mellon Scaife, promote solutions with a broad agenda, often characterized as liberal or conservative or fundamentalist. Special-purpose nonprofit advocacy groups spring up around specific issues such as the right to life (as they frame it) that have implications in many policy areas—for example, a pharmacist’s right to refuse to sell “morning-after” contraceptive pills. Citizens’ groups spring up around one issue or a related set of issues, as was the case for Mothers Against Drunk Driving. Broader-based nonprofits, such as the American Cancer Society, and government agencies, such as the Environmental Protection Agency, from time to time seek to draw people’s attention to issues or advocate for specific solutions.

As issues gain traction and rise on the public policy agenda, the number of organizations involved can be significant. Figure 2.1 lists the 71 Web sites available in April 2004 under the Yahoo grouping Directory>Health>Reproductive Health>Abortion>Pro-Life.

Of course, not all advocacy groups are pushing for some new course of action or a new initiative. Sometimes groups form to make sure that change does not happen or to reverse changes made earlier. The “pro-choice” groups do not want the Roe v. Wade Supreme Court decision in the United States to be overturned; the “pro-life” groups want to return to pre-Roe regulations. The Klu Klux Klan and “white supremacist” groups wanted to roll back desegregation in the 1960s, and they often used very violent methods to further their agendas.

DATA MONITORS AND ASSEMBLERS

This group includes policy centers and so-called watchdog groups, universities, foundations, and government agencies, as well as individual faculty

(Text Continues on Page 56)
AAA Women's Services: Nonmedical, nonprofit, Christian organization offering local services and national referrals to women facing unexpected pregnancy.

Abortion in Spain: Includes statistics, arguments, and other information.

Abortion Is Murder: Offers information, images, help for crisis pregnancies, political party views, and more.

ACT Right to Life Association: Includes seminar papers and submissions on why lethal injections and abortions are bad for our community.

Alameda Pregnancy Counseling Center: Gospel-oriented, Christ-centered, outreach ministry focusing on pro-life issues and offering pregnancy tests and counseling.

America's Crisis Pregnancy Helpline: National place for pregnancy help and assistance.

American Life League

Baptists for Life, Inc.: Information on pregnancy and abortion, assisted suicide, and euthanasia. Help for churches and individuals forming Biblically based pro-life ministries.

Birthright

Bridge to Life: Nonprofit pro-life organization offering services and resources.

Catholics United for Life: Nationwide organization. Site contains many links to other organizations and sources of interest.

Center for Bio-ethical Reform: Nonmedical organization offers educational material, lectures, and articles.

Central Illinois Right to Life: Seeks to educate, convince, and mobilize citizens to take responsible action in defense and support of innocent human life.

Children of the Rosary: Organizes praying sessions at abortion clinics.

Compassion Pregnancy Center of the Monterey Peninsula: Offering counseling, pregnancy testing, and medical services for women with unplanned pregnancies.

Delaware Right to Life: Pro-life organization.

Democrats for Life of America, Inc.: Advocates a pro-life position within the party.

Elliot Institute: Source of information and research on the aftereffects of abortion and postabortion healing.

Feminists for Life of America: Women's rights organization that opposes abortion and promotes equality for women.

Fort Worth Pregnancy Center: Endeavors to help women by providing a free, confidential pregnancy test; education and information on adoption, abortion, and parenting; and referrals.

Gateway Pregnancy Center: Racially mixed Christian crisis center offering free, confidential pregnancy tests and counseling. Promotes chastity and life over abortion.

Georgia Tech Students for Life

Gonzaga University GOAL: Pro-life student group of the Jesuit tradition.

Gravesend Christians Caring for Life Pregnancy Crisis Center: For women and men facing pre- or postabortion trauma. Includes antiabortion information.

Greater Austin Right to Life

(Continued)
Helping Hand Pregnancy Care Center: Counseling for women in unexpected or crisis pregnancy. Pregnancy tests, postabortion counseling available. There are no medical facilities at this location.

Human Life International: International Catholic pro-life and pro-family values nonprofit organization. In English, French, Spanish, and Polish.

Illinois Right to Life: Pro-life organization offering an abstinence starter kit, information related to life issues, and events.

International Pregnancy Help Center: Offering online crisis pregnancy help, advice, and referrals.

Just the Facts: Site provides information about human development in the womb. Literature and presentations available to schools.

Kansans for Life: Pro-life organization fighting for the lives of innocent babies.

Life: Provides information on abortion and other pro-life issues for students, as well as care and help for women faced with a problem pregnancy.

Life Dynamics: Fighting to return full legal protection for every unborn child from the moment of conception.

Life Education Fund of Colorado: Nonprofit organization promoting pro-life values and alternatives to abortion through television commercials.

Life Matters Outreach: Christian-based, nonprofit organization offering pregnancy testing, pro-life alternatives, parenting classes, and postabortion healing.

Life Pregnancy Care Service: Seeks to give support and counsel to women who find themselves with a crisis pregnancy.

Life Care Services: Provides help (before, during, and after) to those facing a crisis pregnancy.

Lutherans for Life of the Mid-Atlantic States: Helping women in unexpected pregnancies, supporting local pregnancy centers, and educating the Lutheran community on God’s gospel of life.

Massachusetts Citizens for Life

Michigan Right to Life

Missionary Catholics United for Life: Pro-life advocacy organization.

Missouri Right to Life

National Campus Life Network: Assists in and contributes to the formation, collaboration, and effectiveness of campus pro-life groups throughout Canada.

National Pro-Life Alliance: Nonprofit organization fighting to end abortion on demand.

National Right to Life Committee

New York State Right to Life Committee: Includes pro-life resources on abortion, euthanasia, adoption, fetal development, abstinence, crisis pregnancy centers, and legislative information.

Ohio Right to Life Society: Topics covered include abortion, euthanasia, infanticide, sexual education, human development, and adoption.

Oneida County Crisis Pregnancy Center
Operation Rescue West

Our Lady of Toledo Shrine: Advocates prayerful, peaceful, practical, pro-life alternatives to abortion.

Pennsylvania Pro-Life Federation: Defending the right to life.

Princeton University—Pro Life

Pro-Life Action League: Protests abortion, promotes sidewalk counseling, and spreads the pro-life message, emphasizing action and education. Headed by Joe Scheidler.

Pro-Life Alliance of Gays and Lesbians

Pro-Life Victoria Inc.: Seeks to educate, promote the pro-life philosophy, and lobby legislators to pass laws to protect the unborn.

Pro-Life Virginia: Christian outreach whose purpose is to save unborn babies.

Pro-Life Wisconsin

ProLife Alliance: UK political party that seeks to secure the protection of the law for all human life from the single-cell embryo stage until natural death.

Prolife.org

Raphael’s Refuge: Mission is to build a regional monument to the unborn and to provide counseling for the parents and others involved.

Republican National Coalition for Life

Roe No More Ministry: Antiabortion group founded by Norma McCorvey, the plaintiff known as Jane Roe in the 1973 case Roe v. Wade.

Safe Haven: Right to life organization.

Several Sources Shelter: Prolife approach to preserve the lives of the unborn. Provides shelter for expectant mothers and their children.

Student LifeNet: Coalition of pro-life students; campaigns on issues including abortion, euthanasia, cloning, embryo research, and better welfare provision for pregnant students.

Tennessee Right to Life: United against abortion, infanticide, euthanasia, human cloning, and fetal tissue research.

Texans United for Life

Vital Signs Ministries: Christ-centered pro-life agency; offers a Christian point of view on abortion, infanticide, euthanasia, chastity, and other life issues.

Westside Crisis Pregnancy Center: Provides information for women facing unplanned pregnancies, as well as information on prenatal care, fetal development, sexuality, abortion, domestic violence, and related links.

Wisconsin Right to Life

Yuma Right to Life

Figure 2.1 Pro-Life Web Sites as of April 2004
members and researchers. They are the ones to dig into data and monitor trends. They are often the first to notice a problem and bring it to the public’s attention. For example, in the 1960s, it was the U.S. Census Bureau that formally defined poverty for us and devised a method with which we can track its ebb and flow for many decades (Citro & Michael, 1995). This important analytical exercise did much to raise awareness of the poverty problem and gave various interveners a common database on which to base arguments and possible solutions. The CDC has played a similar role in bringing our attention to a range of health problems, including ebola, AIDS, and now obesity, simply by documenting prevalence and tracking trends. The World Bank and international agencies such as WHO, the United Nations Educational, Scientific and Cultural Organization (UNESCO), and the Organisation for Economic Co-operation and Development all track the conditions of populations around the world and highlight important disparities. Many of the private groups conduct or sponsor polls on public opinion that can suggest to other players that an issue seems to have traction on the public agenda.

PUBLIC POLICY THINK TANKS

These privately funded groups play an important role in conducting major studies of social problems and often suggest solutions. They also increase the visibility of an issue, through conferences and roundtables in which the issue is described and debated. They are often instrumental in brokering solutions. Think tanks can be found at universities, as part of a foundation, or in nonprofit organizations. Their studies sometimes are designed only to discover a problem and describe its parameters, and they thus serve really as data assemblers. Sometimes their studies are designed to support a particular ideology, a particular framing of an issue, or a particular solution.

Think tanks are sometimes believed to “have their own agendas.” For example, the Heritage Foundation (2005) describes itself as a conservative institution:

Founded in 1973, The Heritage Foundation is a research and educational institute—a think tank—whose mission is to formulate and promote conservative public policies based on the principles of free enterprise, limited government, individual freedom, traditional American values, and a strong national defense.

At the other end of the spectrum is the more liberal Brookings Institution, which describes itself as follows:

The Brookings Institution, one of Washington’s oldest think tanks, is an independent, nonpartisan organization devoted to research, analysis, and public education with an emphasis on economics, foreign policy, governance, and metropolitan policy.
The goal of Brookings activities is to improve the performance of American institutions and the quality of public policy by using social science to analyze emerging issues and to offer practical approaches to those issues in language aimed at the general public. (Brookings Institution, 2003)

INDIVIDUAL AUTHORS, FILMMAKERS, AND DOCUMENTARIANS

Dry reports seldom capture the public fancy. However, talented authors can write books and articles that have dramatic impacts on the public agenda. Over the years, major changes in public consciousness and interest in a particular social problem have come about from such landmark publications as Rachel Carson’s (1962) *Silent Spring*, Ralph Nader’s (1965) *Unsafe at Any Speed*, and David Caplovitz’s (1963) *The Poor Pay More*. In movies, Michael Moore has proved to be a provocative filmmaker, addressing issues of corporate insensitivity, gun control, and war. Michael Spurlock brought our attention to the role of fast foods in the obesity problem with his documentary *Super-Size Me*. CBS producers were the ones to discover and document in vivid detail the Abu Ghraib scandal, and PBS’s *Frontline* has won awards for its coverage of global warming.

POLITICIANS

Quite obviously, politicians are in an ideal position to bring the public’s attention to an issue, as when George W. Bush sought to get public support for Social Security reform with a 60-city set of speeches in early 2005. Politicians are also often in a position to do something about particular solutions because of their position (e.g., they happen to be the president) or because of their persuasive abilities and access to media. For example, in the 1970s, it was Senator Daniel Patrick Moynihan who brought Washington’s attention to the embarrassingly unimpressive appearance of Pennsylvania Avenue, the nation’s capital’s “main street.” Fortunately, as a powerful senator, Moynihan was able to take action to do something about it (Hodgson, 2000). Moynihan happened to serve on the Senate committee that could appropriate the funds so that changes could be made.

Over the last decade, Senators John McCain and Russ Feingold, aided by many analysts and think tanks, again and again highlighted the problems of the federal campaign financing system. In every Congress, they proposed legislation to deal with it, finally succeeding in 2000.

Politicians can also use their power to produce negative impacts. In the 1950s, Senator Joseph McCarthy had extraordinary influence in raising “the Communist menace in government” on the public agenda (Ewald, 1984). McCarthy’s efforts were successful in ruining many careers before the falsity of his charges became clear and he was censured by his colleagues and lost office.
CHARISMATIC INDIVIDUALS

People without official titles can also do much to raise the profile of an issue and get it discussed. Mother Teresa was a dramatic symbol of world poverty, especially in the Asian subcontinent. Martin Luther King, Jr., dramatically symbolized and advocated solutions to racial issues, as do Jesse Jackson and others today. Dave Thomas, founder of Wendy’s, was an ardent advocate for foster children (like him) and for reform in foster care systems. Magic Johnson has done much to personalize the HIV/AIDS problem in the United States, and Erin Brockovich has been a positive symbol for those seeking to combat big business’s environmental pollution.

Social Marketing and Social Agendas

If social marketers are to have a broader role in addressing and ameliorating social problems, it must be with an understanding of how social problems come into existence and are acted on. In this chapter, we have established several important points.

- Social problems typically have their foundation in some sort of objective reality. This reality can be delineated by careful monitoring and research. It often reveals the influence of broad, sweeping social changes or more immediate incidents. Social marketers can influence scholars and researchers to carry out needed documentation.

- Raw data must become “intelligence” to become the basis for social action. The interpretation of data—in contrast to mere summaries—is influenced by the frames imposed by the interpreter. Social marketing can be used to influence those who can advance an issue to stay on message, speak with a single voice, and push in a consistent direction.

- Interpreted data revealing a social problem do not necessarily lead a society (or some part of it) to seek broad solutions. An identified problem is given high or low priority through a process of agenda building or agenda setting. Social marketers can be instrumental in influencing media gatekeepers and others to “promote” an issue as needing solutions.

- There are three critical agendas on which a social problem can hold high or low status: the media agenda, the public agenda, and the policy agenda. The three agendas influence each other in complex ways and inevitably need some level of congruence for a mandate for action to emerge. Social marketers, again, can assist those who seek movement in any of these realms by identifying key target audiences, understanding what motivates them to action, and influencing actions that keep them working synergistically.
Movement up or down agenda hierarchies can be described in terms of identifiable stages. There are key stages at which a careful evaluation of possible courses of action becomes the key to further action. Social marketers need to understand where in this process their skills are best used and where they have to improve their concepts and tools to be more impactful with key players.

A range of players participates in various stages of this process and plays different roles, including assembling data, advocating outcomes or approaches, and humanizing the drama. These actors represent social marketers’ quarry.

Social marketers can also affect agendas through helping others think through various possible courses of action and making eventual choices. This is because most courses of action will involve influencing various behaviors—*and this is social marketing’s forte*. These skills are valuable, whether the issue is one of huge proportions, such as the malaria plague in Africa, or smaller, such as the local bridge club’s efforts to do something about neighborhood blight. *It is all about behavior.*

Social marketers have another role to play at a critical stage in the agenda-setting process. Yankeovich (1992) notes that “the public comes to focus on choices that leaders offer without insisting upon alternatives to consider. Often the proffered options are not the best choices and not the only ones.” In assessing alternatives, social marketers have a potentially important role to play in helping the players understand what actions are or are not likely to lead to real changes in personal behavior. When social marketers find grounds for optimism, a social issue is likely to advance on various agendas toward eventual action and possible resolution.

Sometimes, applying social marketing directly to the problem provides a breakthrough. The challenge of malaria is a good case in point. For years, international agencies sought to reduce the dramatic impact of malaria worldwide through sanitation programs, through citizen education, and by providing rapid treatment of diagnosed cases to minimize interpersonal transmission. Recent application of social marketing concepts and tools holds promise for dramatic impacts on the malaria problem. In 1998, WHO decided to mount a major effort, called *Roll Back Malaria*, that was in part designed to raise the status of the disease on the public and policy agenda, especially in Africa, where it was facing increased competition from the AIDS pandemic. In its Abuja Declaration, WHO and 90 partners agreed to focus on three strategies: more access to rapid treatment, preventive treatment of pregnant women, and widespread marketing of insecticide-treated mosquito netting. The mosquito netting has proven to be highly effective in reducing overall childhood mortality (14% to 29%) as documented in several studies (WHO, 2002).
The WHO strategy is a combination of upstream and downstream approaches involving government, nongovernmental organizations (NGOs), international agencies, and the private sector. The ultimate goal is to create flourishing private sector markets, which have proven significantly lower in cost in delivering mosquito nets and insecticide, especially in urban areas. Still, upstream efforts by governments are needed to reduce taxes and tariffs, and both governments and NGOs need to employ social marketing approaches to stimulate demand. Government and international subsidies for marketing nets and insecticide in poor rural areas are also contemplated. Further details on the Roll Back Malaria program are available at the program’s Web site: http://www.rbm.who.int/cgi-bin/rbm/rbmportal/custom/rbm/home.do.

Notes

1. The perceptive reader will note the spin I put on this by labeling the film “award-winning.”

2. There are undoubtedly times when the size of a problem seems too large, too intractable to justify dealing with it. One billion people around the world have no permanent home. Where to begin?