Session Two:

Using Data To Inform And Tell A Story

Organizing & Presenting Data: A How To Primer

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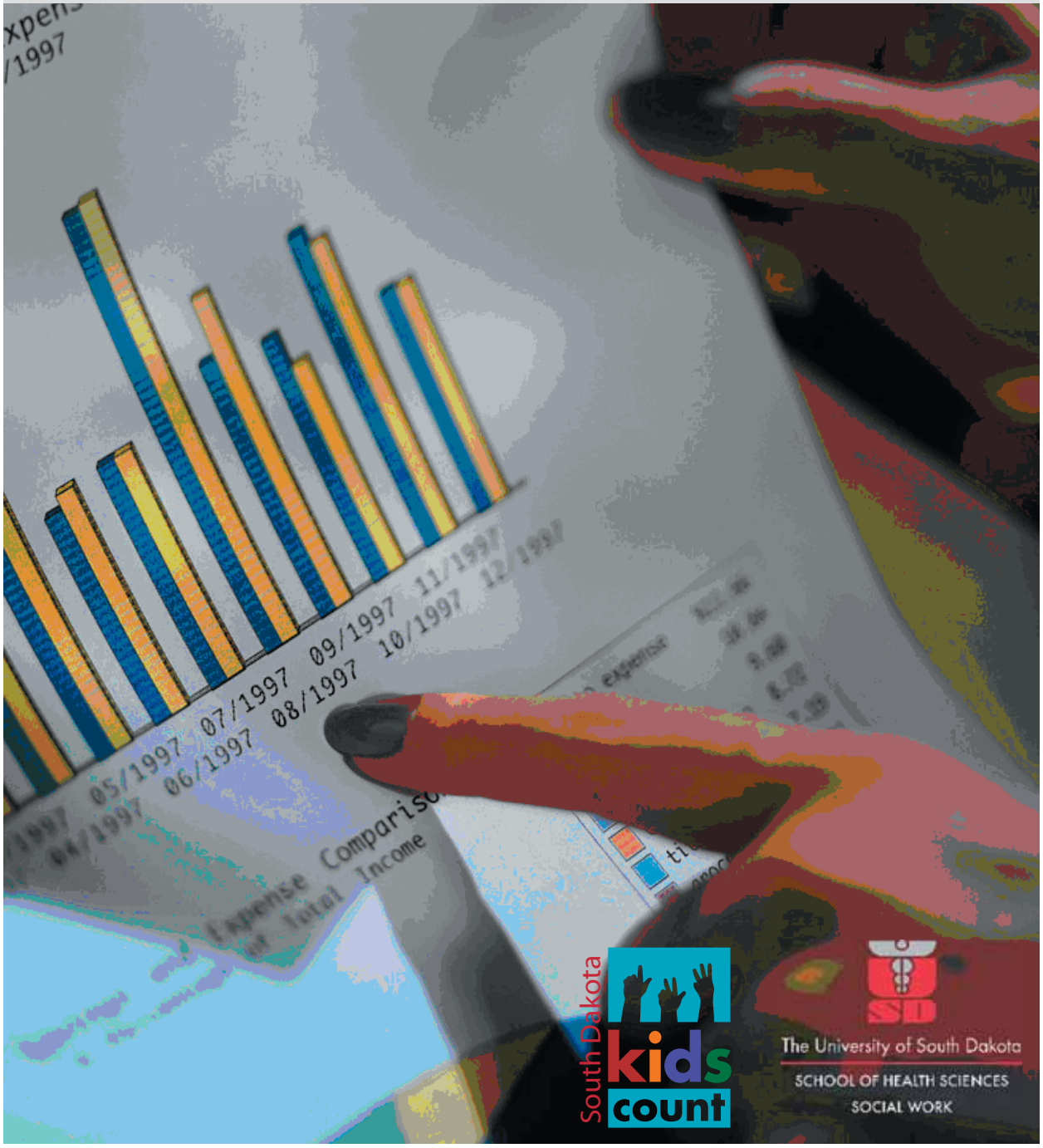

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Introduction

Why a manual about organizing & presenting data?

Have you ever:

- Calculated how long it would take to drive from point A to point B?
- Figured your tax return?
- Calculated your GPA?
- Prepared your household budget for the month?
- Balanced your checkbook?

If so, you are well prepared to use data effectively.

Information is the key to effective change. Changing policies and conditions requires facts. Successful change must have at its foundation reliable data that make a case or prove a point. Unfortunately, the very term "data" intimidates many because they assume that using data require knowledge of complicated mathematical and statistical procedures. To use data effectively, you only need to know how to select the right facts and numbers and to perform the mathematical basics learned in elementary school— counting, adding, subtracting, multiplying, and dividing.

The primer presents five essential steps for working with data. They are:

1. Know the purpose for data: Why build a data story?
2. Know what data you need.
3. Know how to organize the data & where to get the data.
4. Know how to calculate the numbers.
5. Know how to present the data.

The primer is designed to help students, advocates, social/human service workers, and others learn how to select, analyze, and present data. The examples provided will focus on children and family issues. The essential steps presented throughout the manual can apply to any field.

Objectives of the manual

1. Identify the purpose of a data project
    a. Know what you want the data to illustrate
    b. Know what your end product will be
2. Match data needed to the purpose
    a. Identify what data are needed
    b. Map your data search
3. Master simple organizational tasks
    a. Know how to set up a spreadsheet for a primary database
    b. Know how to set up a spreadsheet for importing secondary data
4. Identify data sources
    a. Choose the appropriate source
    b. Choose the appropriate data within the data source
5. Know how to perform appropriate calculations
    a. Match calculations to the purpose
    b. Match calculations to the data
6. Know how to present the data
    a. Match data display to the purpose
    b. Maximize data presentation options

Chapter One - Know the purpose for data: Why build a data story?

Summary of Chapter

The chapter will provide a brief overview of what data are and how data enrich our abilities to understand and describe our world. The difference between secondary and primary data is discussed. Through an exercise and example, learners enhance their appreciation and daily use of data.

Objectives of Chapter

I. To understand what data are

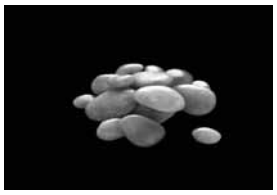
II. To understand the difference between secondary and primary data

III. To appreciate what data do for us

What are data?

Webster's Dictionary (Merriam-Webster, 2005) defines data as *"factual information (as measurements or statistics) used as a basis for reasoning, discussion, or calculation."* Data must be measurable and lay the foundation for discussion, calculation, and/or reasoning. You determine the purpose for your data to guide what you hope to discover or support. What you are investigating will define your data sources. The purpose for your inquiry will also help determine how you will assemble, not just gather, data. The assembly of the correct data leads to sound decision-making. Consider the difference between gathering data and assembling data.

Gathering or assembling data



Gather

The definition (Merriam-Webster, 2005) of gather is *"to cause to come together; to accumulate gradually, amass, harvest, pick."* What you end up with is a pile of data much like the pile of stones in the picture. It is gathered but what it is intended to show us is unclear. A well defined purpose for data is critical.

Assemble

The definition (Merriam-Webster, 2005) of assemble is "*to bring together into a group or a whole; to fit together or join together the parts*." By assembling data you are working towards a purpose. You have an end product in mind and you are building toward that goal. You are telling the story, illustrating the purpose of your data or research with your data.

To put it another way, when you order something, such as a bicycle, and it comes in a box, what does it say? Some **assembly** required. They have already gathered the necessary parts. You have to assemble it to look like the picture on the front. Similarly, you don't gather a puzzle together, you assemble it. Without a clear purpose (order and form) for data you are just gathering it. You bring order and form to the chaos by assembling data in a meaningful way.

Data as evidence

Data as evidence are the building blocks for "proof". Funding authorities want proof, via evidence, to substantiate claims of need and effectiveness of services or programs. This in turn leads to a more integrated and coherent policy response to issues. Evidence is a statement of fact substantiated by some sort of data.

The data most common to service provision are:

1) Data to substantiate a claim of need

2) Data to describe an agency's or a community's provision of services or lack of services

3) Data to describe a region, people, or events

Most professionals and students are familiar with primary data gathering procedures. Fewer professionals and students are comfortable with searching for secondary data sources. The manual has been prepared to raise the comfort level and use of secondary data sources.

Primary versus Secondary data

Primary data are gathered when an agency or individual designs the questions used to solicit specific information. Often in the professional service arena an individual or agency will design research questions to create a survey or questionnaire. Surveys and questionnaires are often used to help solicit information (data) that is assembled into a report, review, or grant proposal. These data are specific and limited to the practice and programs of an individual and/or agency. Professional practitioners and agencies use primary data to plan, evaluate and expand their efforts.

Primary data gathering tools are:

- direct observation - lets you focus on details of importance to you.
- surveys - written surveys let you collect considerable quantities of detailed data. They can be telephone surveys, record reviews, computer generated surveys or a questionnaire.

- interviews - allow in-depth questioning and follow-up questions.
- focus groups - allow in-depth questioning and discussion on a topic.

What you learn in setting up a spreadsheet in **Chapter Three** can apply to managing primary data, however this manual will focus on secondary data use. A secondary data source means that the information is simply second-hand, existing databases are secondary data sources.

For example, the information from the U.S. Census Bureau is secondary unless you are looking at copies of the original returns. The list of purely secondary source material could include:

- databases
- TV, radio, internet
- magazines, newspapers
- reviews
- research articles

There are many secondary data sources. Secondary data are less expensive and (sometimes) easier to acquire than primary data. However, problems may arise around questions of the reliability, accuracy and integrity of the data. Who collected it? Can they be trusted? How old is it? Where was it collected? Can the data be verified? A general rule of thumb is that databases maintained by government agencies and other agencies of reputable standing provide the researcher with an accepted level of credibility.

Often secondary data has been pre-processed to give totals or aggregates and the original details are lost so you can't verify it by replicating the methods used by the original data collectors. Attention to totals, aggregates, and percentages is key to your use of the data.

Exercise

The first task is to get comfortable with data. Work through the exercises below to focus on data and its utility in professional communication.

Try to accurately describe a person or object using general observations. Really try to accurately describe the person or object with just vague general descriptors. How successful or unsuccessful were your attempts? Now explain the same person or object with specific data/details. Notice the difference in having data versus not having data.

Consider the two paragraphs below and see how adding data helps make your case more persuasive.

Statement without data: *In recent years, South Dakota has seen both a need and a demand for low-cost, high quality child care. South Dakota has a high number of females over age 16, with children, in the workforce. The need for child care touches the lives of every South Dakotan. The child care industry is an essential part of the state's economic development strategy.*

Statement with data: *Without child care, most South Dakota businesses would be hard-pressed to find enough employees. That's because in South Dakota 73 percent of children under age 6 have one or both parents who are in the workforce. South Dakota leads the nation in the percentage of women in the workforce who have children younger than 6. In South Dakota, the percentage is 77.5%, compared to 63.5% for the United States as a whole. At 47 percent, South Dakota also leads the nation with the highest percentage of children under age 6 in paid child care. That's almost twice the national average of 26 percent.*

Licensed or registered child care itself is a significant industry in South Dakota that:

- *Generates $100.6 million in gross annual receipts.*
- *Creates 4,410 jobs in South Dakota.*
- *Yields $124.5 million in direct economic activity.*

(Cochran, C. and Stuefen, R., 2004)

Chapter Two - Know what data you need

Summary of Chapter

The chapter will discuss how the purpose for data guides the data assembly process. The chapter also leads the learner through a step-by-step process for importing data from secondary sources into their own working databases. Methods for primary data sources are also discussed.

Objective of Chapter

To understand how the purpose for data guides the assembly of data.

The purpose for your data

The purpose for your data: what you want to show through data is critical to setting parameters around what data you want. What data you want sets limits on where you go for the data. Everyone can successfully assemble data that accurately answers questions, adds credibility to a claim or powerful descriptors to a situation. The key to successful data assembly begins with clarity of the data search. Data gathering requires identifying and defining the facts needed to satisfy the purpose for your data search.

How do you begin to assemble data?

What do you hope to prove or discover, discuss, or make decisions about? Look at the big picture first. The "big" picture reveals the specifics and will guide your search. Here is where you begin to use the description of a situation to identify where numbers would add credibility to your words.

Decide what data you need to assemble

Remember there are three distinct types of data that overlap from time to time when we are gathering data.

1) Data to substantiate a claim of need

2) Data to describe an agency's or a community's provision or lack of services

3) Data to describe a region, people, or events

Data about people, or "demographic" data, are such pieces of information as age, race, gender, income, employment status, and grade in school. Some of these characteristics do not change—such as gender or race. Others, such as age, education, and income do change. Data about events are such occurrences as births, deaths, graduations, traffic crashes, and immunizations. Data about things

can be places, organizations, families, programs, and objects such as houses. All three types of data quantify something about a time and a place. They refer to a specific time, perhaps a day, a calendar year, or a state or federal fiscal year.

"Cross-sectional" data refer to one point in time; "longitudinal" data (sometimes called time-series data) cover at least two points in time. Data also refer to a specific geographic area.

We will now look at the mechanics necessary to assemble data to investigate a simple question.

Exercise

School Age Children

Take the example below and identify the data source questions. These will be used to guide you through building your data set.

Your agency has been asked by the Committee on Special Issues (CSI) to investigate the number of school age children in a five county region that are living in single mother families. The CSI is interested in providing programs to assist single mothers, with school age children, who are living in poverty.

Key facts

1) *Identify the counties*
2) *"In poverty" will set parameters around the income of the single mothers*
3) *"School age children" sets a parameter around the number of children to be identified in each county (ages 5 to 17)*
4) *Single mothers – find data on single female families*
5) *Data will be used to report findings*

With key facts clarified, we know that we will assemble the data in a report to the CSI on the number of school age children in our region that are living with single mothers experiencing poverty.

NOTE: Always document your data source. If you use Census or other time specific data double check poverty thresholds or other qualifiers to insure you are using the correct definitions and qualifiers for the year of the data source. Remember Census data are dated data. Make sure you cite the year and particular table you use.

Chapter Three - Know how to organize the data & where to get data

Summary of Chapter

The chapter will instruct learners on understanding databases and spreadsheets.

The chapter will assist learners in setting up a database and a spreadsheet to be able to manipulate the data.

The chapter will instruct learners on obtaining secondary data from databases found on the Internet.

Objectives of Chapter

I. To understand the basics of a database and a spreadsheet.

II. To begin to build a database with information from various sources .

III. To know how to set up a spreadsheet of data.

IV. To understand the very basics of how the Internet works.

V. To begin to build a data source sheet with information on where to get the specific data you need.

VI. To know how to obtain secondary data

What is a database?

A database is a collection of related data stored together in an electronic file that can be easily retrieved. The collected data could be in any number of formats (electronic, printed, graphic, audio, statistical, combinations). There are physical databases (paper/print) and electronic databases.

Examples of databases:

- phone book
- voter registration rolls
- immunization records of children in a family
- Census Bureau data
- library catalogue system

Which database do you use? Each database has a particular set of attributes that need to be kept in mind when selecting one to use:

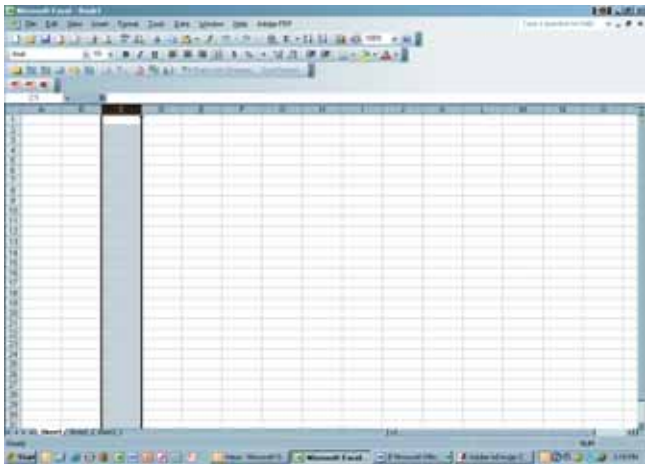
- What subjects are covered by the database?
- What does the database include?
- What year was the data collected?
- Is the data from a sample or 100% data?

Understanding how databases are organized may help retrieve information more efficiently. The easiest way to explain how a database is organized is by explaining a spreadsheet.

What is a spreadsheet?[1]

A spreadsheet (James, 2006) consists of a grid made from columns and rows. It is an environment that can make number manipulation easy and somewhat painless.

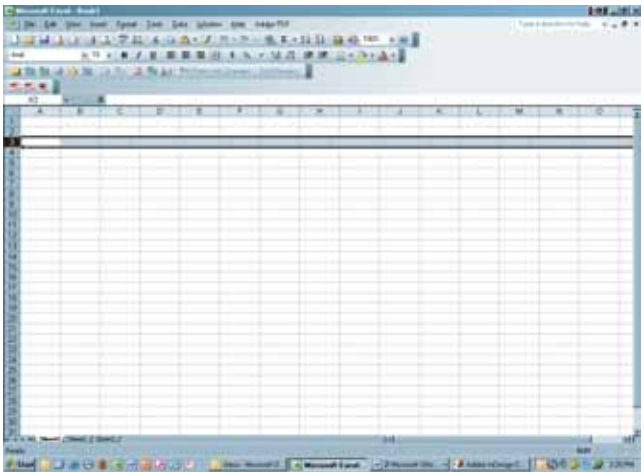
In a spreadsheet the column is defined as the vertical space that is going up and down the window. *Letters* are used to designate each column's location.



In the above diagram the COLUMN labeled C is highlighted.

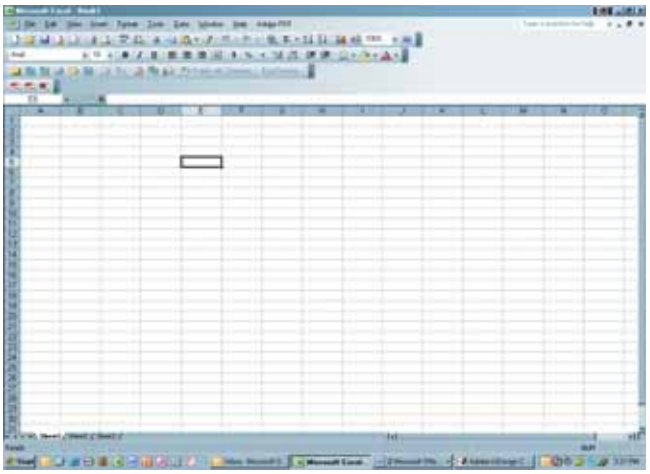
[1] *Note* Information in this section is from "A basic tutorial of Excel" by Brad James, (2006). Adapted with permission.

The row is defined as the horizontal space that is going across the window. *Numbers* are used to designate each row's location.



In the above diagram the ROW labeled 3 is highlighted.

The cell is defined as the space where a specified row and column intersect. Each cell is assigned a name according to its column letter and row number.



In the above diagram the CELL labeled E5 is highlighted. When referencing a cell, you should put the column first and the row second.

There are three basic types of data that can be entered.

- Labels - (text with no numerical value). Labels are text entries. They do not have a value associated with them. We typically use labels to identify what we are talking about.

- Constants - (just a number -- constant value). Constants are entries that have a specific fixed value. If someone asks you how old you are, you would answer with a specific answer. Other people will have different answers, but it is a fixed value for each person. Sometimes constants are referring to dollars, sometimes referring to percentages, and other times referring to a number of events. These are typed into the computer with just the numbers and are changed to display their type of number by formatting. You will need to know what the numbers are representing, e.g. a fraction, a data, a percentage.

- Formulas - (a mathematical equation used to calculate). Formulas are entries that have an equation that calculate the value to display. The equation will be updated upon the change or entry of any data that is referenced in the equation. There is a list of the functions available for formulas within Microsoft Excel, under the menu insert down to function. Formulas or functions must begin with an equal sign (=). When entering formulas into a spreadsheet make as many references as possible to existing data. If you can reference that information you don't have to type it in again. And more importantly, if that other information changes, you do not have to change the equations.

Spreadsheets have math functions built into them. The most basic operations are the standard multiply, divide, add and subtract. These operations follow the order of operations (just like algebra). Let's look at some examples.

Selecting cells in an equation is a very important concept of a spreadsheet. You need to know how to reference the data in other parts of the spreadsheet. You can select several cells together if we can specify a starting cell and a stopping cell. This will select ALL the cells within this specified BLOCK of cells. If the cells that we want to work with are not together (non-contiguous cells) you can use a comma to separate the cells or by holding down the control-key (command key on a MAC) and selecting cells or blocks of cells. A comma will be inserted automatically to separate these chunks of data. Consider the data at the top of page 17:

	A	B
1	3,005	3,135
2	16,637	18,253
3	3,311	3,206
4	7,185	7,089
5	25,931	25,207
6	35,231	35,580
7	5,503	5,485
8	1,773	1,759
9	8,763	7,914

The most common function in any spreadsheet is the sum function. The sum function takes all of the values in each of the specified cells and totals their values. To obtain the sum of the numbers in columns A1 -A9 highlight the cell below A9, click on the Σ on the toolbar and hit enter on the keyboard. This is also a drop-down box that you can select other functions such as average, maximum, minimum, and standard deviation.

You often need to format the numbers to display the appropriate number of decimals, dollar signs, percentage, red (for negative dollars), etc. It is best to keep numbers describing similar items as uniform as possible. If we have the number 3.53262624672423, we would probably have to make the column wider. We need to set the number of decimal places to what is important. If this was a dollar figure it should be $3.53.

A question that everyone (who has ever worked on a spreadsheet) has asked at one time or another is, “Where did all my numbers go?” or same question, “Where did all of those ####### come from and why are they in my spreadsheet?” The problem is the number trying to be displayed in a particular cell does not have enough width to display properly. To clear up the problem you just need to make the column wider.

Here are two ways to change the column width:

1. Select the column (or columns) with the problem by clicking on their labels (letters). Then you choose the MENU FORMAT. Go down to COLUMN and over to WIDTH and type in a new number for the column width.

2. Move the arrow to the right side of the column label and click and drag the mouse to the right (to make wider) or left (to make smaller). Let up on the mouse button when the column is wide enough.

If you have a spreadsheet designed and you forgot to include some important information, you can insert a column into an existing spreadsheet. What you must do is click on the column label (letter) and choose Columns from the Insert menu. This will insert a column immediately to the left of the selected column.

Numbers can usually be represented quicker and to a larger audience in a picture format. Excel has a chart program built into its main program. The Chart Wizard will step you through questions that will (basically) draw the chart from the data that you have selected. There are many types of charts. The two most widely used are the bar chart and the pie chart. The bar chart is usually used to display a change (growth or decline) over a time period. You can quickly compare the numbers of two different bar charts to each other. The pie chart is usually used to look at what makes up a whole. If you had a pie chart of where you spent your money you could look at the percentages of dollars spent on food, transportation, housing, and other categories. You can add legends, titles, and change many of the display variables.

The Search

The Internet is a collection of interconnected information resources. There is no central indexing. However, there are ways of getting information. The internet is like a library in that way.

In a library you can find information by looking for a book on the catalog system or browsing the shelves. Once you have a book, you need to scan it to see if it contains helpful information. You can also look for information in magazines by flipping through magazines on the shelf or using a periodical guide. Again, you must read the article to see if it contains the information you need. The same is true with the Internet. There are several places and ways to look for information. However, only by actually looking at the information can you know if it is helpful.

The Internet contains a tremendous amount of information. It is easy to get sidetracked during a search. That is why it is best to focus and limit your search before you begin. So, before you begin: 1) determine the time you will spend online; 2) formulate a question(s) to answer; and 3) develop a search plan; think of related sites you have visited, and think of key words.

The quickest way to perform an Internet search is by using a search engine. Search engines allow you to perform key word searches. Search engines will work best with specific and narrow topics. With a search engine, you can perform a simple search by typing in the word or words that describe your topic. Be as specific as possible.

The search engine will return sites that contain the words you have submitted. Most engines will "weigh" returns by putting the sites they feel will be most relevant to the searcher first. Different search engines have different qualifications for weighing items.

Databases on the Internet

The following are some of the internet websites that have downloadable databases. Links to each of these pages can be found on the South Dakota KIDS COUNT Web page: **www.sdkidscount.org**

American FactFinder - http://factfinder.census.gov
Information you will find:

- Decennial Census - taken every 10 years to collect information about the people and housing of the United States
- American Community Survey - an ongoing survey that provides data about your community every year
- Puerto Rico Community Survey - the equivalent of the American Community Survey for Puerto Rico
- Population Estimates Program - population numbers between censuses
- Economic Census - profiles the U.S. economy every 5 years
- Annual Economic Surveys - data from the Annual Survey of Manufactures and Nonemployer Statistics

How to download the data you need:
Information about downloading data can be found on the SD KIDS COUNT website: **http://www.usd.edu/sdkidscount/Toolbox.cfm**

The Annie E. Casey Foundation - www.aecf.org
Since 1948, the Annie E. Casey Foundation (AECF) has worked to build better futures for disadvantaged children and their families in the United States. The primary mission of the Foundation is to foster public policies, human service reforms, and community supports that more effectively meet the needs of today's vulnerable children and families.

KIDS COUNT, an initiative of the Annie E. Casey Foundation, is a national and state-by-state effort to track the status of children in the U.S. By providing policymakers and citizens with benchmarks of child well-being, KIDS COUNT seeks to enrich local, state, and national discussions concerning ways to secure better futures for all children. KIDS COUNT has several interactive online databases that allow you to create free, customized data reports.

KIDS COUNT Data Center
http://www.kidscount.org/datacenter/
This system contains state- and city-level data for over 100 measures of child well-being, including all the measures regularly used in our popular KIDS COUNT Data Book and The Right Start for America's Newborns. This easy-to-use, powerful online database allows you to generate custom reports for a geographic area (profiles) or to compare areas on a topic (ranking, maps, and line graphs).

Information you will find:
- Profiles by geographic area
- Comparisons by topic:
    - KIDS COUNT Data Book Indicators
    - Right Start Indicators
    - Children in Immigrant Families
    - Education
    - Employment and Income
    - Health
    - Health Insurance
    - Population and Family Characteristics
    - Poverty
    - Youth Risk Factors
- Data Snapshot Series
- New and Updated Indicators

How to download the data you need:
Under the Download Raw Data Section Click on Raw Data. This link will take you to data you can download. Click on and save the data to your computer. The data is in a .tab file. If you open this file a dialogue box will open asking what you want to do. Choose *select the program from a list,* choose OK, and select Excel to open the file.

KIDS COUNT: CLIKS: Community Level Information on Kids
http://www.kidscount.org/cgi-bin/cliks.cgi
CLIKS is a powerful tool for community leaders, policymakers, service providers, parents, and others who want to take a closer look at the local factors that affect the lives of children and families. The CLIKS database allows users to access state-specific inventories of data from local sources, such as health departments, human service agencies, and schools. CLIKS presents trend data and interactive access to data also published in the South Dakota KIDS COUNT Fact Book. CLIKS data are available in profiles, graphs, maps, and raw data.

Information you will find:
•Health
•Demographic
•Education
•Poverty
•Assistance
•Labor Force
•Safety

How to download the data you need:
The information can be found on the SD KIDS COUNT website:
http://www.usd.edu/sdkidscount/Toolbox.cfm

KIDS COUNT: Census Data Online
http://www.kidscount.org/census/

Information you will find:	Geographic regions include:
Income and poverty	The United States
Parental employment	Individual states
Education	The nation's largest cities
Language	Counties
Disability	American Indian/Alaskan Native/ Hawaiian Home Lands
Neighborhood characteristics	Consolidated Metropolitan Statistical Areas
Age and sex	Metropolitan Statistical Areas
Race	Primary Metropolitan Statistical Areas
Hispanic Origin Status	Congressional districts (108th Congress)
Living arrangements	New England Towns

How to download the data you need:
Choose Raw Data from the Census Online page. Then choose the geographic area. To download a file of raw data, click on the download icon .
The files are available in tab-delimited text format. This format can be easily imported by most spreadsheet applications. Due to inherent limitations in some spreadsheet applications (such as Microsoft Excel) all downloads are divided into six parts (Parts 1 - 5 and the Variable Codebook). You must download all six parts to get the complete set of data. The Variable Codebook is the same for all data downloads (i.e. you'll only need to download it once).

The National Center for Education Statistics (NCES)
http://nces.ed.gov/

Information you will find:
•Data related to education.

How to download the data you need:
Go to this link: **http://nces.ed.gov/surveys/sdds/downloadmain.asp**
Click on Download Data, make selections and data will be downloaded.

Data/Statistics on the Internet

FBI Uniform Crime Reporting - http://www.fbi.gov/ucr/ucr.htm
Collects information on many crimes reported to law enforcement authorities. Text and tables can be accessed at this site.

The Centers for Disease Control and Prevention (CDC) - http://www.cdc.gov/
The lead federal agency for protecting the health and safety of people. The CDC provides credible information to enhance health decisions, and promotes health through strong partnerships.

The CDC's National Center for Health Statistics - http://www.cdc.gov/nchs/
The nation's principal health statistics agency compiles statistical information to guide actions and policies to improve the health of the nation's population.

Child Trends - http://www.childtrends.org/
A nonprofit, nonpartisan children's research organization that collect and analyze data; conduct, synthesize, and disseminate research; design and evaluate programs; and develop and test promising approaches to research in the field.

The Child Trends DataBank http://www.childtrendsdatabank.org/ is a one-stop shop for the latest national trends and research on over 100 key indicators of child and youth well-being, with new indicators added each month.

SAMHSA - http://www.drugabusestatistics.samhsa.gov
The Federal agency charged with improving the quality and availability of prevention, treatment, and rehabilitative services in order to reduce illness, death, disability, and cost to society resulting from substance abuse and mental illnesses.

UNICEF - http://www.unicef.org/statistics
UNICEF regularly publishes economic and social statistics on the countries and territories of the world, with particular reference to children's well-being.

Bureau of Labor Statistics - http://stats.bls.gov
The BLS is the principal fact-finding agency for the Federal Government in the broad field of labor economics and statistics.

Federal Statistics - http://www.fedstats.gov/
The site contains statistics from over 70 federal agencies.

Federal Interagency Forum on Child and Family Statistics
http://www.childstats.gov/
Access the report on America's Children: Key National Indicators of Well-being and other statistical reports. There are links to KIDS COUNT national and state data.

Statistics on Child and Family Well-Being
http://www.childwelfare.gov/systemwide/statistics/wellbeing.cfm
State and national statistics on child and family well-being indicators, such as health, childcare, education, income, and marriage. Includes data on the demographics of children, families, and the communities in which they live.

The National Center on Child Death Review
The home page **http://www.childdeathreview.org/home.htm** has many resources. A state map of the US - **http://www.childdeathreview.org/statistics.htm** links to other sites.

Organizing your Data Sources

Once you have data sources you may want to keep a listing of the organization, website address, type of data obtained, and the date data were obtained. This is useful if different people are responsible for collecting or finding data. This type of data can also be used to keep track of your data sources.

Organization	Website	Type of Data obtained	Date obtained
SD State Data Center	http://www.usd.edu/sdsdc/	U.S. Census Bureau and Economic data	March 9, 2007
SD KIDS COUNT	http://www.sdkidscount.org	Data on children and families in South Dakota	January 9, 2007

Exercise

From the CSI exercise on page 12 of **Chapter Two** you should have the following qualifiers to guide your data aquisition.

- Counties in SD that are in the Clay County region: Clay, Union, Turner, Lincoln, and Yankton.
- School age children, ages 5 to 17
- Mothers in poverty

Follow the step-by-step process to find the data and place it in a spreadsheet:

1. Open your browser to the U. S. Census Bureau homepage:

   http://www.census.gov/

2. Click on American FactFinder on left hand column on the Census Bureau Homepage.

3. In the middle column under the heading 'Getting Detailed Data', click on get data, which is located under Decennial Census.

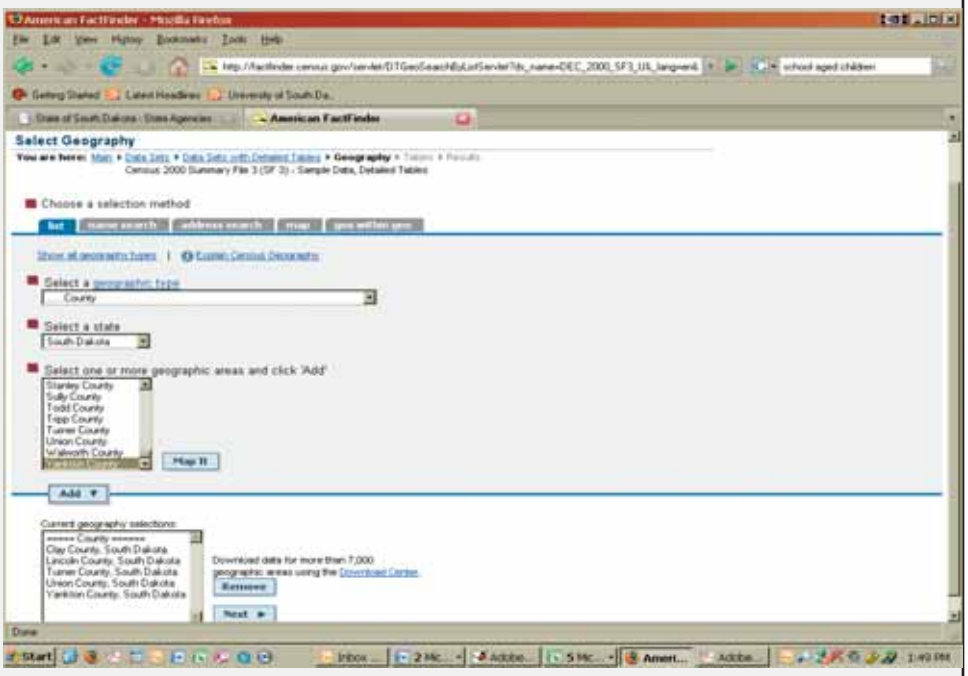
4 Click the radio button by Summary File 3, then select Detailed Tables from the column on the right.

5. Select Geographic type: County

6. Select a State: South Dakota

7. Select the counties identified in **Chapter Two** - Clay, Lincoln, Turner, Union, and Yankton. (After selecting a county select the add tab and the county will appear in the box).

At this point your screen should look similar to the one below:

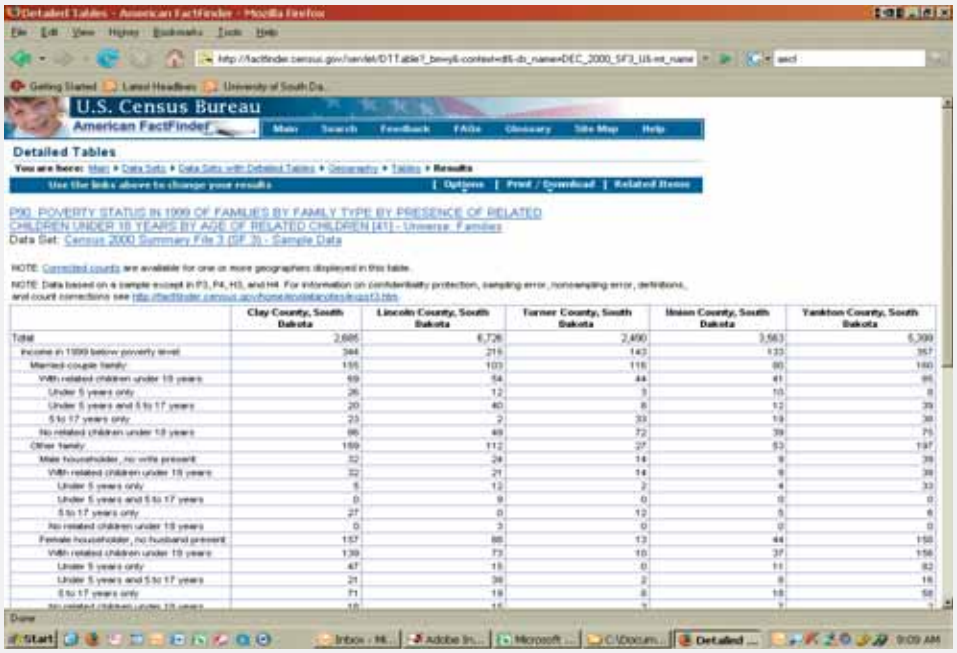


8. Select Next. This is where the detailed tables are selected for the data.

9. The data needed are:
   a. The number of school age children
   b. The number of single mothers experiencing poverty

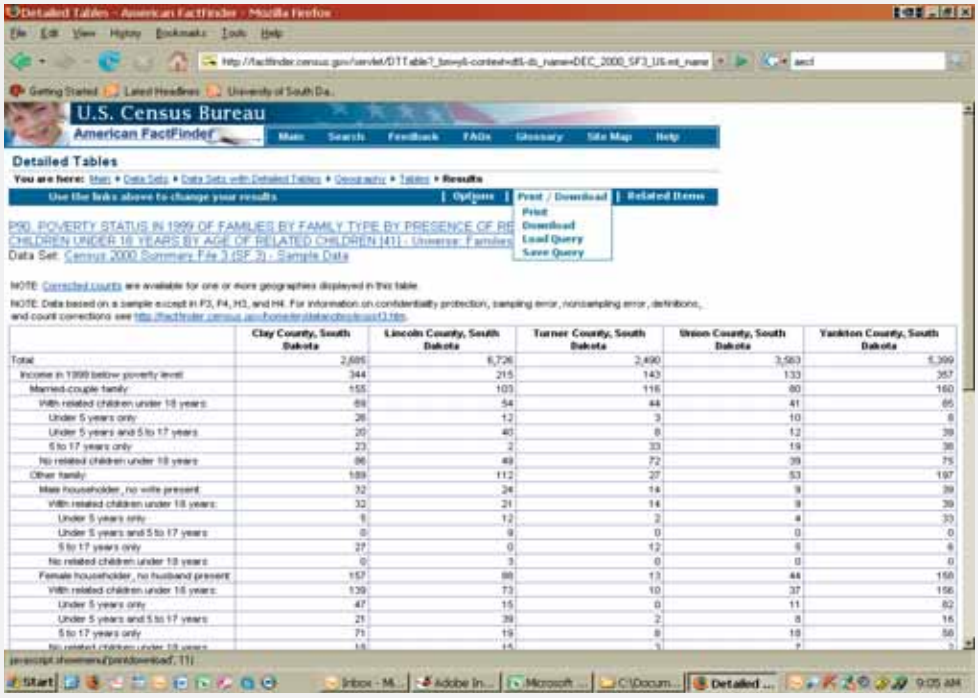
10. The data needed can be found in Table P90. Scroll down the list and highlight Table P90 then select Add. Please note the many options available in the data tables. We have identified the most appropriate table to meet the data qualifiers.

11. Click on Show Result. The data are shown with the counties in columns (vertically) and the age goups as rows (horizontally).

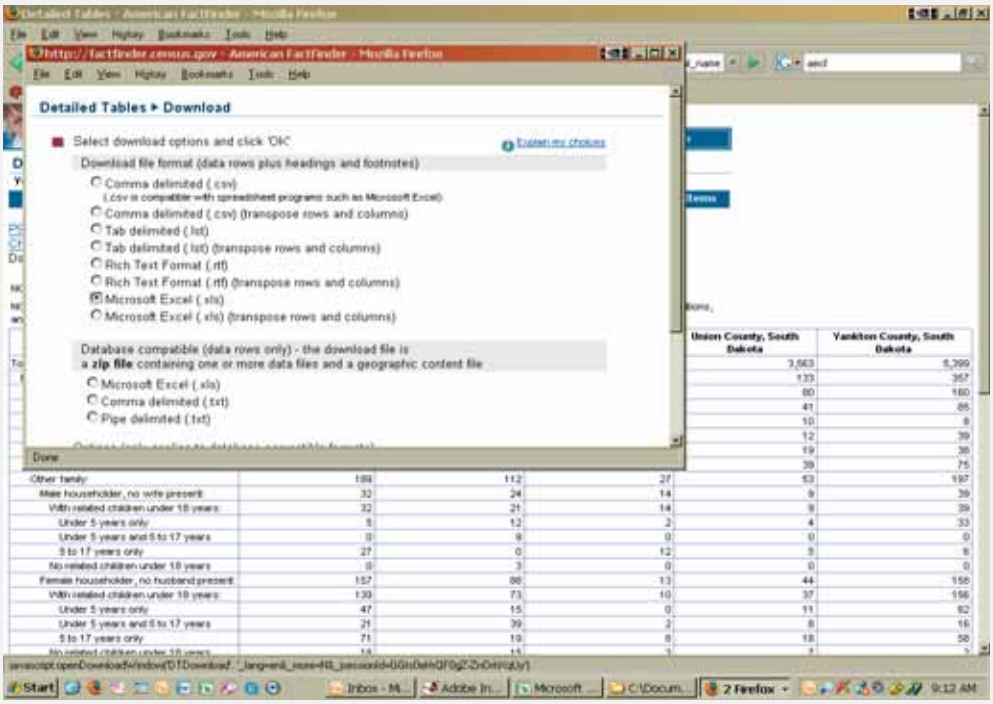


	Clay County, South Dakota	Lincoln County, South Dakota	Turner County, South Dakota	Union County, South Dakota	Yankton County, South Dakota
Total	2,885	6,726	2,490	3,563	6,399
Income in 1999 below poverty level	344	219	140	133	357
Married-couple family	155	103	116	80	160
With related children under 18 years	69	54	44	41	95
Under 5 years only	26	12	3	10	8
Under 5 years and 5 to 17 years	20	40	8	12	39
5 to 17 years only	23	2	33	19	38
No related children under 18 years	86	49	72	39	75
Other family	189	112	27	53	197
Male householder, no wife present	32	24	14	9	39
With related children under 18 years	32	21	14	9	39
Under 5 years only	5	12	2	4	33
Under 5 years and 5 to 17 years	0	9	0	0	0
5 to 17 years only	27	0	12	5	6
No related children under 18 years	0	3	0	0	0
Female householder, no husband present	157	88	13	44	158
With related children under 18 years	139	73	10	37	156
Under 5 years only	47	15	0	11	62
Under 5 years and 5 to 17 years	21	38	2	8	16
5 to 17 years only	71	19	8	18	58

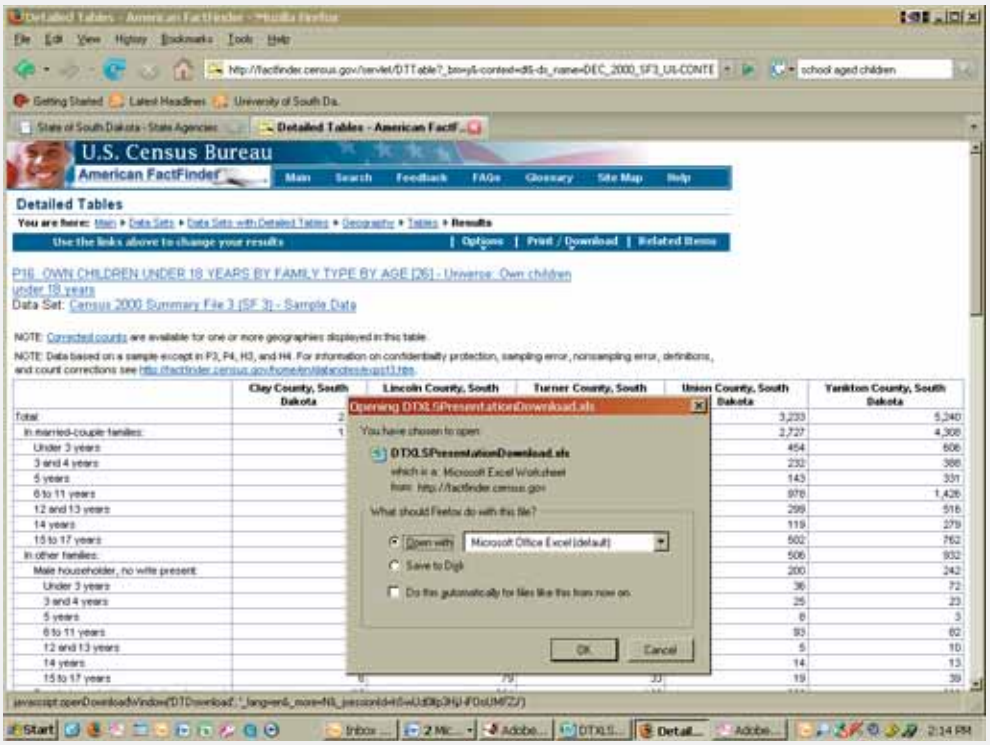
12. Locate the button that says Print/Download and select download.



13. Select Microsoft Excel (.xls) from the Download file format section, then select OK. *(The 'pop-up' does not show if the computer's security setting are high. Click on the banner near the top of the window to "allow the pop-up.")*

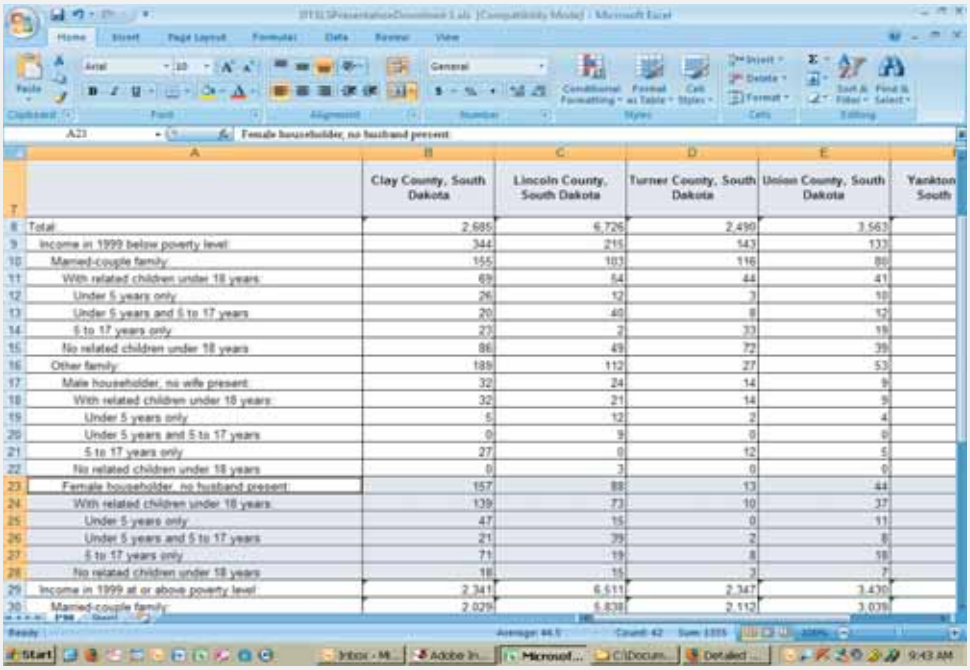


14. A dialogue box appears that asks Open with Microsoft Excel. Select OK.



15. Your Excel Workbook will have a worksheet that is labeled P90. We will copy the data we need into a new worksheet within the same workbook.

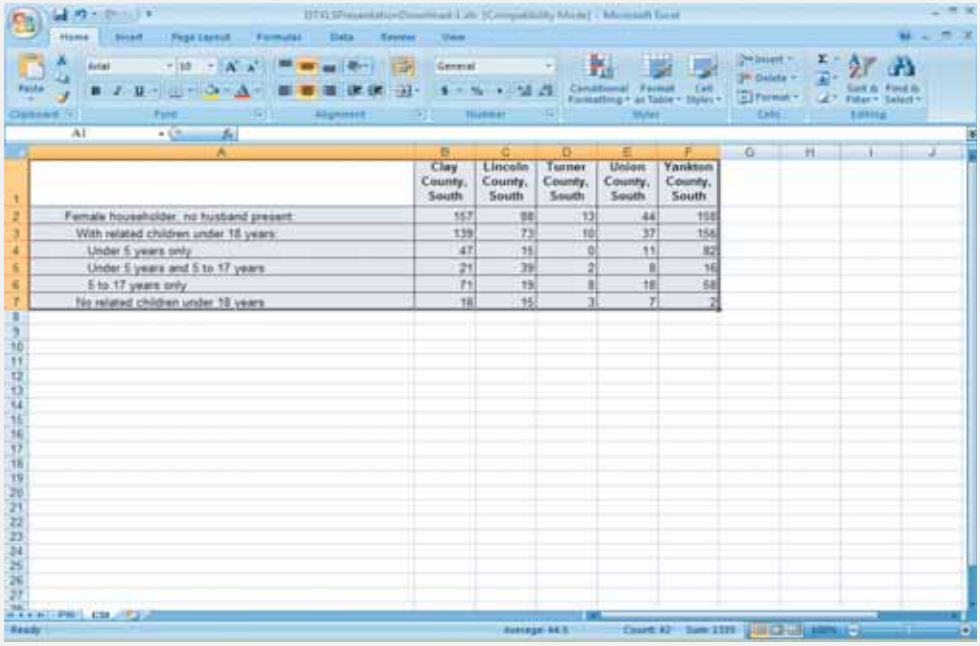
16. Highlight the row with the county names, hold down the Crtl key and highlight the female householder no husband present section under the income in 1999 below poverty level section. The highlighted areas would look similar to: (see top of next page).



	Clay County, South Dakota	Lincoln County, South Dakota	Turner County, South Dakota	Union County, South Dakota	Yankton South
Total	2,685	6,726	2,490	3,563	
Income in 1999 below poverty level	344	215	143	133	
Married-couple family	155	103	116	80	
With related children under 18 years	69	54	44	41	
Under 5 years only	26	12	3	10	
Under 5 years and 5 to 17 years	20	40	8	12	
5 to 17 years only	23	2	33	19	
No related children under 18 years	86	49	72	39	
Other family:	189	112	27	53	
Male householder, no wife present:	32	24	14	9	
With related children under 18 years:	32	21	14	9	
Under 5 years only	5	12	2	4	
Under 5 years and 5 to 17 years	0	9	0	0	
5 to 17 years only	27	0	12	5	
No related children under 18 years	0	3	0	0	
Female householder, no husband present:	157	88	13	44	
With related children under 18 years	139	73	10	37	
Under 5 years only	47	15	0	11	
Under 5 years and 5 to 17 years	21	39	2	8	
5 to 17 years only	71	19	8	18	
No related children under 18 years	18	15	3	7	
Income in 1999 at or above poverty level	2,341	6,511	2,347	3,430	
Married-couple family:	2,029	5,838	2,112	3,039	

17. Once the area is highlighted right click on the mouse and select copy.

18. Paste the information in a new worksheet. Rename the worksheet CSI (right-click on tab that says Sheet 1. In the dialog box select rename. The tab will be highlighted. Type in CSI and click when finished. This is the data that will be used in compiling the report for the CSI. Don't forget to save the workbook.



	Clay County, South	Lincoln County, South	Turner County, South	Union County, South	Yankton County, South
Female householder, no husband present:	157	88	13	44	158
With related children under 18 years	139	73	10	37	158
Under 5 years only	47	15	0	11	82
Under 5 years and 5 to 17 years	21	39	2	8	16
5 to 17 years only	71	19	8	18	58
No related children under 18 years	18	15	3	7	2

Chapter Four - Know how to calculate the numbers

Summary of Chapter

The chapter will instruct learners on manipulating the data using simple math and statistical procedures.

Objectives of Chapter

I. To understand and perform basic mathematical calculations

II. To understand and perform basic statistical calculations.

Math Tools

Many people dislike math. They dismiss math with "I'm a word person, not a numbers person". Anyone who works with data has to be able to do math, but the math you need to know is very basic.

Convert a fraction into a decimal:
Divide the top number of the fraction by the bottom number
General example: 5/8 = "5 divided by 8" = 0.625
Example: The state data center newsletter noted five-eighths of the 1,750 families in County X are living below the poverty level. You calculate the decimal by selecting the "5", then the divide button, then the "8", then the "=" button, and discover that 5/8= 0.625. You then multiply 0.625 by 1,750 to learn that there are about 1,094 families living in poverty in County X.

Convert a decimal into a percentage:
Multiply by 100, or simply move the decimal point two places to the RIGHT.
0.858 = 85.8% or 1.255 = 125.5%
Example: If five-eighths of the families are living in poverty that is 0.625, which is 62.5% of them.

Convert a percentage into a decimal:
Divide by 100, or simply move the decimal point two places to the LEFT.
43.7% = 0.437 or 148% = 1.48
Example: If 62.5% of families are living in poverty that is 0.625

Convert a percentage into a fraction:
Often, the best way to express a percentage in a story is by turning it into a fraction, such as "About two-thirds of the adults in County Y have college degrees". The simplest way is to remember that "percent" really means "per 100". Therefore, for example, 43% is the fraction 43/100.

For converting percentages into common fractions or useful phrases refer to the information below. You can be approximate; for example, if the percentage in question is 35%, it's perfectly accurate to say "More than a third…"

5% "one out of every 20"
10% "a tenth" or "one in ten"
20% "a fifth" or "one in five"
25% "a fourth" or "one in four"
30% "three out of ten"
33% "a third" or "one in three"
40% "two out of every five"
50% "half"
60% "three-fifths" or "three out of five"
66% "two-thirds" or "two out of three"
70% "seven out of 10"
75% "three-fourths" or "three out of four"
80% "four out of five"
90% "nine out of ten"

Calculate X% of Y:
Convert X% into a decimal, then multiply that decimal by Y
20% of 90 = 0.20 x 90 = 18 or 130.5% of 45 = 1.305 x 45 = 58.7

Example: As above, if 62.5% of 1,750 families are living in poverty, then 0.625 x 1,750 = 1,094 families living in poverty.

Compare two numbers using percentages (A is what percent of B?):
A divided by B, multiplied by 100 turns the decimal into a percentage
5 is what percent of 8?: 5/8 = .625 = 62.5%, so 5 is 62.5% of 8
8 is what percent of 5?: 8/5 = 1.6 = 160%, so 8 is 160% of 5
Example: The median household income in one neighborhood is $20,000, compared to the county's overall median household income of $24,000.

Therefore, the neighborhood's median income is (20000/24000) x 100 = 0.833 x 100=83.3% of the county median household income.

Compare numbers using percentage difference (A is what percentage MORE or LESS than B?):
(A divided by B) - 1, then multiply by 100 to turn the decimal into a percentage. Use MORE THAN if the answer is positive, and LESS THAN if it's negative.

5 and 8: (5/8) - 1 = 0.625 - 1 = -0.375 = -37.5%, so 5 is 37.5% less than 8
8 and 5: (8/5) - 1 = 1.6 - 1 = .6 = 60%, so 8 is 60% more than 5

Example: The median household income in one neighborhood is $20,000, compared to the county's overall median household income of $24,000. Therefore, the neighborhood's median household income is (20000/24000)-1 = 0.833-1=-0.167=-16.7%. So you can say the neighborhood's median household income is about 17% less than, or below, the county's median household income.

Compare a NEW number with an OLD number using percentage change (this is just a variation of percentage difference):

The percent change is calculated in the following manner:
(newer year number - older year number) / older year number x 100

Example: 2000 population under age 5 (newer number) minus 1990 population under age 5 (older number)/ 1990 population under age 5 (older number) x 100
51,069/54,504 = 3,435/54,504 = -0.063 x 100 = - 6.3%
Between 1990 & 2000 there was a 6.3% decrease in the population under age 5

Statistical Tools

There are statistical terms that you need to understand and be able to calculate when working with data. Such statistics are particularly useful in helping summarize and put into context the numbers you'll be examining.

For instance, it would be cumbersome to describe the economic status of a city by listing the incomes of every single resident. Instead, we take all those incomes and collapse them into a more meaningful number.

Aggregates
Aggregate is just the fancy way of saying total. Certain data are supplied as aggregates within a given piece of geography, such as the total value of housing or the total number of apartments with 1, 2, or 3 bedrooms.

Mean

The mean, also called the average, is the sum of a group of values, divided by the number of values in the group. For instance, assume you have the total populations of each of 210 census tracts, total the column containing the population count for each tract and then divide by 210 to find that the average size of the census tracts.

Rate

This is a way of standardizing values so that different areas can be compared fairly. You can recognize that a rate is being talked about if the word "per" is in the description, such as "deaths per 1,000 live births."

To calculate a rate you need three pieces of information: (1) the total group number, (2) the number in the sub group and (3) the 'per' number--per 1,000, 10,000, or 100,000. The "per" number is your multiplier.

Example: Rate: (number in sub-group / number in whole group) x multiplier (number of infant deaths in the state [70] / number of live births in the state [10,698]) x multiplier (70 / 10,698) = 0.0065 x 1,000 = 6.5

Thus the infant mortality rate for South Dakota, in 2002, was 6.5. This means that for every 1,000 live births that occurred in the state in 2002, there were 6.5 infant deaths.

Median

The median simply is the middle value in a list of values that have been sorted in numerical order. Say there are N values in the list: If N is an odd number, the median is the value located at number [(N-1)/2)+1. If N is even, the median is the average of item N/2 and (N/2)+1.] Excel and other spreadsheet software packages will figure the median of a group of numbers without you having to sort and count halfway down the list.

Don't confuse the median with the mean, although it's quite possible for the mean and the median of a group of numbers to be the same. The median is often used in data tabulations instead of the average, particularly with variables that may not be distributed evenly, such as age, income, or home value. The reason is that the median isn't as likely to be affected by extreme values.

Weighted Average

This is for figuring out an average for a larger area when all you have is information from the smaller areas that comprise it. For example, imagine that three tracts have these median home values: $60,000, $80,000, and $120,000. The simple average of those values is $86,667. But let's say that the three tracts have this many houses respectively: 3,000, 2,000, and 500. The weighted average is calculated by multiplying the individual averages by the number of values that created each of them, getting the total, and then dividing by the total number of values. So it looks like this: (($60000*3000) + ($80000*2000) + ($120000*500)) / (3000 + 2000 + 500) = $72,727.

This is only an approximation of what you could get if you had the individual values for each of the 5,500 homes. But $72,727 is likely to be a lot closer to the real value than $86,667.

Percentiles

Like the median, percentiles are just values at specified intervals in an ordered list of value; a value in the 90th percentile, for instance, is greater than 90% of the rest of the values. The median is the 50th percentile. Commonly used "n-tiles" are quartiles (four segments divided at 75%, 50% and 25% of the list) and quintiles (five segments divided at 80%, 60%, 40% and 20% of the list.)

Exercise

Using the spreadsheet workbook (worksheets P90 and CSI) you created in **Chapter Three**, perform the following calculations:

1. How many related children under 18 years are in all five counties?
2. What is the average number of related children under 18 years in the five counties?
3. Using the worksheet labeled P90, what is the percent of other families (male householder, no wife present and female householder, no husband present) with income in 1999 below the poverty level?
4. Using the worksheet labeled P90, what is the percent of other families (male householder, no wife present and female householder, no husband present) with income in 1999 at or above the poverty level?
5. Using the worksheet labeled P90, which county has the highest percent of male householders with 1999 income below poverty? (Name the county and give the percent)

Answers:

1. How many related children under 18 years are in all five counties?

415

2. What is the average number of related children under 18 years in the five counties?

83

3. Using the worksheet labeled P90, what is the percent of other families (male householder, no wife present and female householder, no husband present) with income in 1999 below the poverty level?

48.5%

4. Using the worksheet labeled P90, what is the percent of other families (male householder, no wife present and female householder, no husband present) with income in 1999 at or above the poverty level?

11.6%

5. Using the worksheet labeled P90, which county has the highest percent of male householders with 1999 income below poverty? (Name the county and give the percent)

Lincoln County, 11.2%

Chapter Five - Know how to present your assembled data

Summary of Chapter

The chapter will assist learners in pulling together research information into concise presentation form. Learners will have the opportunity to develop and present their data reports.

Objective of Chapter

To present data in a manner that is understandable to your audience.

Use numbers & words to tell your story

"Words and numbers are of equal value, for, in the cloak of knowledge, one is warp and the other woof. It is no more important to count the sands than it is to name the stars. Therefore, let both kingdoms live in peace." Juster, 1961, p. 77.

There are many guidelines available to follow for presenting data. A resource from the Population Reference Bureau is below.

Guidelines for Effective Data Presentations - www.prb.org
then select PRB Library. The guide gives practical advice and examples in the art of presenting data to nonspecialist audiences.

Also, keep the following in mind:
• Check your numbers, then check them again. Have someone else proof your work and your arithmetic. Go back and check your numbers against the original source (be sure to keep a copy of all your sources). Remember, one error in one table can kill the overall credibility of your material—and of your organizational efforts.

• If you can avoid it, don't hire an outside "expert" to do your work for you. If you don't do your own analysis, you can't explain it to your intended audience. If you feel the data are too complicated for you to work with, it may be too complicated for your audience to understand.

• Make your presentation simple. Percentages and rates, for example, are great statistics—just about everyone can grasp them well enough to get your point. If you believe there are two different audiences for your report that need different levels of information, consider preparing two separate reports.

• Try to show change over time. Remember, you want to use as many points in time as possible but at least two points in time separated by at least five years.

• Use the most recent data you can get. It is easier to convince your audience that a problem exists now if up-to-date numbers make up your case. When the most recent data are more than a year or two old, be sure you identify them as "the most recent data available".

• Always try to use data that show some intervention will make a difference.

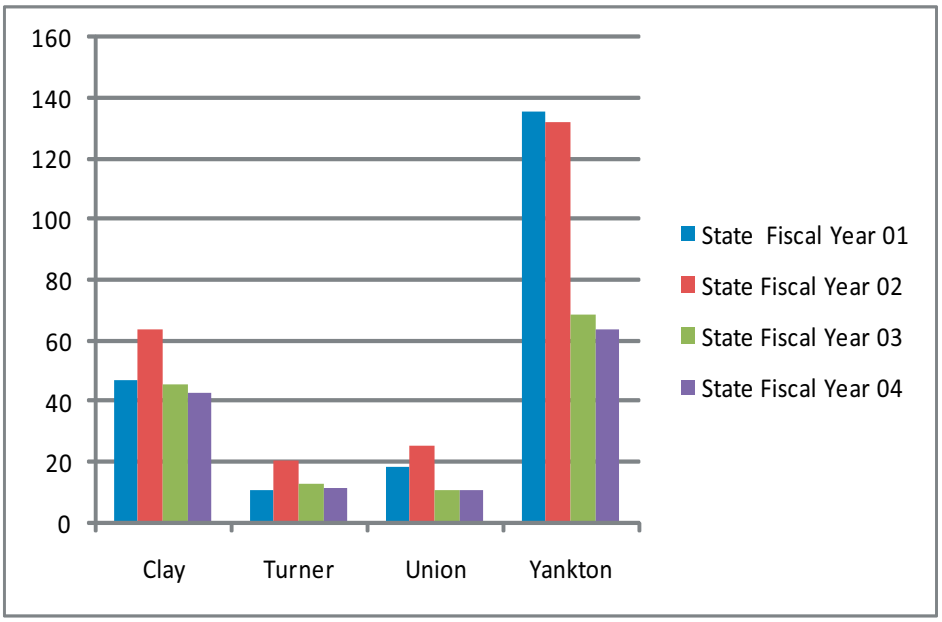
Using the principles outlined above, suppose that you work in a four county area. Your supervisor wants you to compile information on juvenile admissions to Drug or Alcohol Treatment Programs for the past four years. You give your supervisor this information for the following state fiscal years: Clay County had 47 admits in SFY 01, 64 in SFY02, 46 in SFY03, and 43 in SFY 04. Turner County had 11 admits in SFY 01, 21 in SFY02, 13 in SFY03, and 12 in SFY 04. Union County had 19 admits in SFY 01, 26 in SFY02, 11 in SFY03, and 11 in SFY 04. Yankton County had 136 admits in SFY 01, 132 in SFY02, 69 in SFY03, and 64 in SFY 04.

One way that we can make the data easier to understand is by placing the data in a table.

Juvenile admissions to drug and alcohol treatment centers by county and fiscal year

County	State Fiscal Year 01	State Fiscal Year 02	State Fiscal Year 03	State Fiscal Year 04
Clay	47	64	46	43
Turner	11	21	13	12
Union	19	26	11	11
Yankton	136	132	69	64

A picture is worth a thousand words – many things are easier to understand if portrayed visually and graphically, rather than in text or verbally.



Data in a spreadsheet

Using the data in the spreadsheet developed in **Chapter Three** create a chart.

Instructions for creating a chart using Microsoft Excel 2007:

(Note 1: South Dakota KIDS COUNT has an example of creating a chart using Microsoft Office Excel 2003. The instructions are on the SD KIDS COUNT website: **http://www.usd.edu/sdkidscount/Toolbox.cfm**)

(Note 2: By using the search engine of your choice, Google, Yahoo, Ask.com, GoodSearch.com, to name a few you can find information on how to make a chart using Microsoft Excel in whatever version you have.)

An audio tutorial of how to make a chart using Microsoft Office Excel 2007 can be found at:

http://office.microsoft.com/training/training.aspx?AssetID=RC101757361033

The training has the following goals:

* Create a chart using the new Excel 2007 commands.

* Make changes to a chart after you create it.

* Understand basic chart terminology.

The course includes:

• Two self-paced lessons and two practice sessions for hands-on experience. Practices require Excel 2007.

• A short test at the end of each lesson; tests are not scored.

• A Quick Reference Card you can take away from the course.

Note: You may want to edit the information in the Excel worksheet before making the chart, e.g., shorten the column headings from Clay County, South Dakota to Clay. You may want to further delete the data you will not use or you can use the Crtl key to select the data you want to use to create the chart.

Creating a chart is not difficult, however you need to understand these aspects when making a chart:

1. What type of chart to use?

2. How should the chart look, i.e., positioning of rows and columns of information?

Chart Type

What type of chart do you want?

An explanation of the different chart types available in Microsoft Excel can be found here:

http://office.microsoft.com/en-us/excel/HA012337371033.aspx

A brief explanation of the more common charts used follows.

Bar Graphs

The Bar graph displays the real-time value of specific variables and is mainly used for comparisons. Bar graphs consist of an axis and a series of labeled horizontal or vertical bars that show different values for each bar. The numbers along a side of the bar graph are called the scale. A double bar graph gives two pieces of information for each item on the vertical axis, rather than just one.

Line Graph

A line graph is a way to summarize how two pieces of information are related and how they vary depending on one another. The numbers along a side of the line graph are called the scale. The line graph follows a set of data over time and is used for analyzing trends in a specific variable.

Pie Charts

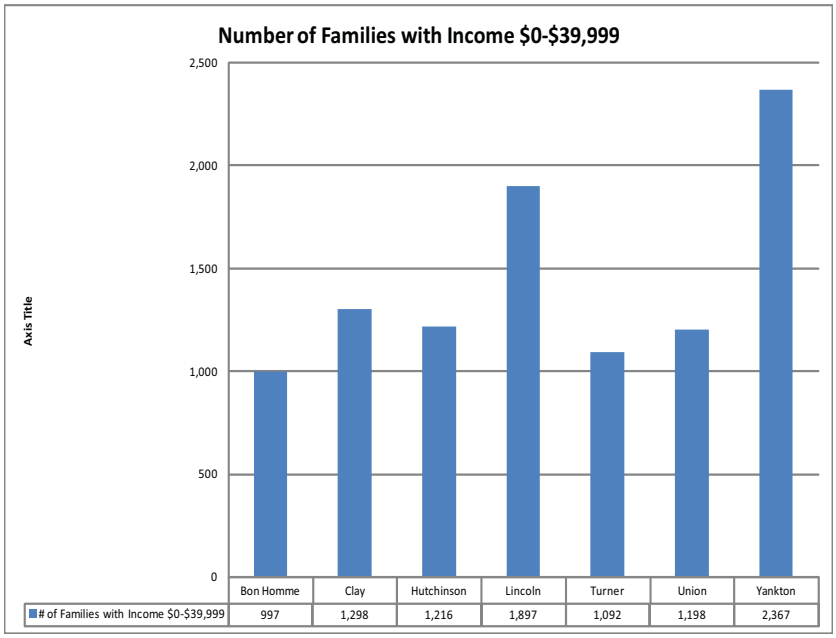
A pie chart is a circle graph divided into pieces, each displaying the size of some related piece of information. Pie charts are used to display the sizes of parts that make up some whole.

Orientation of the data series

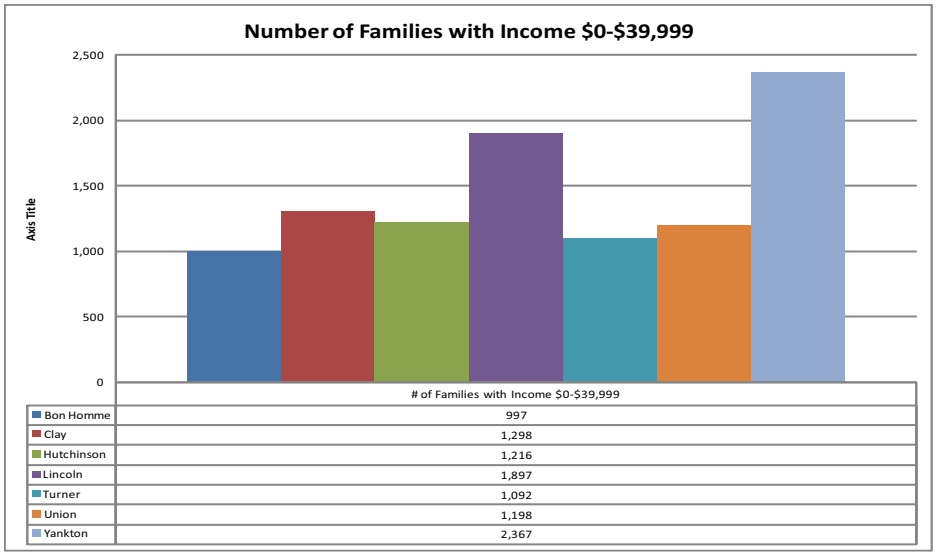
When you create a chart, Microsoft Office Excel determines the orientation of the data series. After you create a chart you can change the way that worksheet rows and columns are plotted in the chart by switching rows to columns or vice versa.

For example, when you create a chart for two rows and columns of worksheet data, Excel plots the data by rows, but you may want to plot the data by columns instead.

The chart below shows the Number of Families with income $0 - $39,000 by county:



If we switch our rows and columns, *[click the chart that contains the data that you want to plot differently. This displays the chart tools, adding the Design, Layout, and Format tabs. On the Design tab, in the Data group, click Switch Row/Column. When you click the Switch Row/Column button, Excel immediately changes the way the data in the chart is plotted by switching between the worksheet rows and the columns]*, the chart would look similar to this:



	# of Families with Income $0-$39,999
Bon Homme	997
Clay	1,298
Hutchinson	1,216
Lincoln	1,897
Turner	1,092
Union	1,198
Yankton	2,367

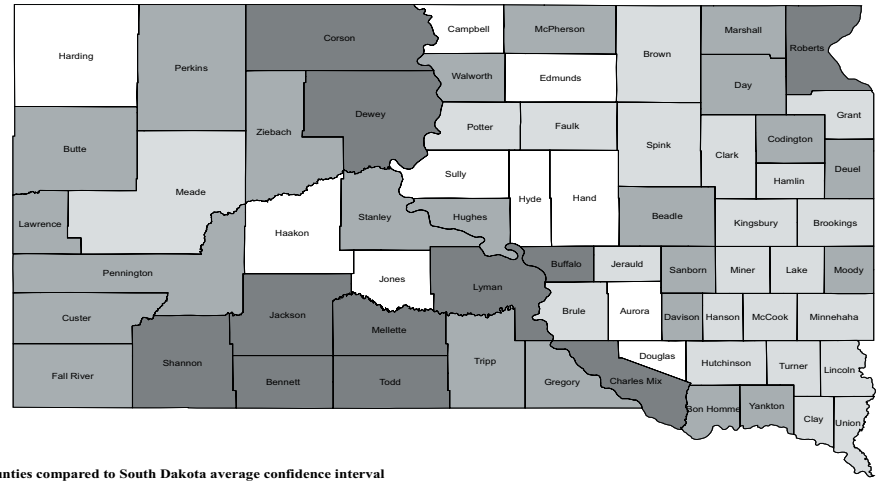
You need to determine the best way to display your data in a way that is easily understandable to your audience.

Using GIS to tell your story

The newest technology that the social sciences are using is Geographic Information Systems (GIS). GIS is powerful software technology, which allows unlimited amounts of information to be linked to a geographic location. With a digital map you can see a state, region, county, city, neighborhood, and block in terms of demographics, income levels, poverty rates, epidemics, high school dropout rates, and much more.

GIS can help people understand social problems, show discrepancies between needs and resources, or help legislators and other to see where the problem is occurring (as opposed to providing statistics, charts and graphs).

Births to Single Teens - County comparisons to the State (2002-06)
South Dakota rate = 8.7% of single females under age 20



Counties compared to South Dakota average confidence interval

- LNE - Low Number of Events
- Rate Significantly Better than South Dakota Average
- Rate Not Significantly Different than South Dakota Average
- Rate Significantly Worse than South Dakota Average

Map by: South Dakota KIDS COUNT - Business Research Bureau
The University of South Dakota
Data are from the South Dakota Department of Health

Exercise

The CSI is excited about your research. They have asked you to put together a 10-minute presentation of your findings. Your audience will be the local United Way funding committee and community members.

In your presentation you need to use visuals (charts, graphs, etc), and other (as appropriate) data to convince the funding committee there is a need for programs to assist single mothers in poverty with school age children.

Your presentation could be an opportunity to identify services known to help single mothers in poverty. Look through your professional literature and find evidence based best practices for working with single mothers in poverty. Use this opportunity to support the need with data and possible programs with best practices research.

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January 2008

FRAMING PUBLIC ISSUES

FRAME WORKS INSTITUTE

FRAMING PUBLIC ISSUES

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FrameWorks

FRAMING PUBLIC ISSUES
ABOUT THIS TOOLKIT

This Toolkit was created by the FrameWorks Institute to help issues advocates learn and apply new communications thinking to frame their work for better public understanding and engagement. We hope that these tools will inspire new thinking and new techniques among policy experts and advocates who seek to resolve social problems – whether for children and families in a particular state or for the global environment.

"Framing Public Issues," the Workshop and the Toolkit, bring to issues advocates some of the most exciting new thinking on communications. The FrameWorks Institute, in partnership with a research team of scholars and practitioners, has pioneered a new approach to communicating social issues called strategic frame analysis. This approach incorporates key concepts from the cognitive and social sciences that govern how people process information, especially news, with special emphasis on social problems, from adolescent development and child care to low-wage work and violence prevention.

In the pages that follow and in the trainings that often accompany this Toolkit, you will learn how to answer questions like the following: What shapes public opinion about the issues that affect children, families, poor people, communities? What role does the news play? How do policymakers gauge public opinion? How can I do a better job of helping people see the realities my organization struggles to address every day? The answers to these questions will help you translate your vision of what can be done to improve public life into a language that engages ordinary people and advances their interest in policy and program solutions.

The work of many collaborators is reflected in these pages. Most prominently: Franklin D. Gilliam, Jr., Ph.D., Associate Vice Chancellor, Community Partnerships and Director, Center for Communications and Community, UCLA; Axel Aubrun and Joe Grady from Cultural Logic; and Meg Bostrom with Public Knowledge. We also wish to thank Lauri Andress for writing the section on Strategic Frame Analysis and Policy Making. We encourage you to stay in touch with our work through our Website, www.frameworksinstitute.org, where we routinely post foundation-sponsored multi-method research on public perceptions of numerous social issues.

Please note that, should you wish to quote from or use parts of this Toolkit, standard rules of citation and permission apply. Please consult the FrameWorks Institute for permission to distribute multiple copies.

Susan Nall Bales
President, FrameWorks Institute
April 2005
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I. Framing A Message: How to Think About Communications

The FrameWorks Institute works with nonprofit groups and philanthropic foundations to document how the American public understands various social issues and how nonprofit communicators can frame the public discourse on those issues to advance policy outcomes. To do this, we have developed an approach called strategic frame analysis (SFA), a new way of thinking about communications that FrameWorks believes is especially relevant to the types of social issues addressed by Workshop participants. What follows is an overview of this approach, with examples and applications provided in subsequent pages. For those who are interested in learning more about this perspective, we invite you to visit our Website at www.frameworksinstitute.org, and to peruse techniques and examples posted online from a variety of issues arenas. FrameWorks also offers an online, interactive workshop at www.eworkshop.frameworksinstitute.org (passcode: j51qiu), focusing specifically on children's issues.

"The way in which the world is imagined determines at any particular moment what men will do."
Walter Lippmann, Public Opinion, 1921

When issues advocates approach communications, they do so with three important questions in mind:

1. How do we get people to think about our issues?
2. How do we get them to think about our issues in such a way that they will want to solve them through public policies, not only through individual actions?
3. How do we get them to think about issues in such a way that they want to solve them through our public policies?

WHAT RESEARCH SUGGESTS

- People use mental shortcuts to make sense of the world.
- Incoming information provides cues about where to "file" it mentally.
- People get most information about public affairs from the news media which, over time, creates a framework of expectation, or a dominant frame.
- Over time, we develop habits of thought and expectation and configure incoming information to conform to this frame.

Strategic frame analysis – FrameWorks' approach to communications – is based on a decade of research in the social and cognitive sciences that demonstrates that the answers to these questions relates to what Walter Lippmann called "the pictures in our heads." People use mental shortcuts to make sense of the world. These mental shortcuts rely on "frames," or a small set of internalized concepts and values that allow us to accord meaning to unfolding events and new information. These frames can be triggered by various elements, such as language choices and different messengers or images. These communications elements, therefore, have a profound influence on decision outcomes.

Frames are existing constructs that allow us to interpret developing events. William Raspberry, writing in *The Washington Post,* explains the power of frames when he says,

"Perhaps the only way we can assimilate new information is by fitting it into the framework of something we already understand." He goes on to explore the meaning of terrorism "by thinking about America and black people." And, in so doing, he demonstrates the way our judgments about political issues can be influenced by the frame we use to make sense of new situations. Thinking about the civil-rights movement, Raspberry writes: "When we saw it as a choice between civil progress and bloodshed, our minds went one way. When we saw the choice as between siding with brutal law enforcement and siding with black folk demanding change, our minds went the other way." Raspberry has elegantly illuminated the framing process that is so critical, if invisible, to political judgment.

WHAT IS A FRAME?

"Frames are organizing principles that are socially shared and persistent over time, that work symbolically to meaningfully structure the social world."
Stephen D. Reese, Framing Public Life, 2001

WHERE DO PEOPLE GET THEIR FRAMES OF PUBLIC AFFAIRS?

"Most people don't think about most issues most of the time," write Nelson Polsby and Aaron Wildavsky in a famous analysis of American public opinion. The public has little daily contact with many issues on the public agenda, yet their opinions greatly influence policymaker priorities and behavior. Traditionally, news media is the main source of Americans' information about public affairs. In this way, the media dramatically influences what issues the public and their policymakers will address. Moreover, messages conveyed by mainstream media take on the value of public narratives about the ways of the world. Thus, media doesn't simply tell us what to think about, it tells us how to think about issues. News coverage influences:

What issues people think are important for government to address (agenda-setting)

The lens through which people interpret issues (framing), and

What information will prove relevant for social and political judgments (priming).

Our research on young adults/teens, for example, included an investigation of how the news media covered the issue. This analysis sought to chart the volume of coverage to see if teens figured on the national agenda, to isolate the way the media was framing the issue – how it was telling the "teens" story. We looked for explanations of cause, not merely effect, and for the inclusion of solutions and policy debates in the coverage. We did so because we know that different kinds of frames have different kinds of effects on public opinion.

"The use of either the episodic or the thematic news frame affects how individuals assign responsibility for political issues; episodic framing tends to elicit individualistic rather than societal attributions of responsibility while thematic framing has the opposite effect. Since television news is heavily episodic, its effect is generally to induce attributions of responsibility to individual victims or perpetrators rather than to broad social forces."
Shanto Iyengar, *Is Anyone Responsible?,* 1991

I. Framing A Message: How to Think About Communications

Continued

The episodic frame presents a portrait, while the thematic frame pulls the camera back to present a landscape. The importance of this distinction is that the two types of frames have very different effects on how people view a given problem--and whether people will see the need for individual-level and/or broader environmental or institutional solutions to that problem.

Episodic frames reduce life to a series of disconnected episodes, random events or case studies. "Betty Jones and her family of four are braving the elements tonight because the homeless shelter was full," begins an episodic story on the homeless. Such a news story might go on to describe how the children miss their toys, how cold it is, when they last ate, etc. What it will not describe is how many people are homeless in this city, whether the numbers are increasing or decreasing, or the root causes of homelessness.

In contrast, thematic frames provide details about trends, not just individuals; they identify shortcomings at the community or systems level that have contributed to the problem. "The homeless shelter at 4th and Q was full again tonight because of drastic reductions in city allocations, and this situation is taking its toll on families like Betty Jones'. But the mayor says the Jones family will have to brave it because there is no more money in the city to pay ....."

The more episodically social issues are framed, the less likely it is that citizens will hold government accountable for solving the problem. The more thematic and contextual the coverage, the more likely it is that citizens will see the issue as one appropriate to government resolution.

The media's influence on how we think about social problems lasts far beyond our memory of a particular newscast or news topic. The way the news is "framed" on many issues sets up habits of thought and expectation that, over time, are so powerful that they serve to configure new information to conform to this frame. When advocacy groups communicate to their members and potential adherents, they have options to repeat or break these dominant frames of discourse. Understanding which frames serve to advance which policy options with which groups becomes central to any movement's strategy.

The literature of social movements suggests that the prudent choice of frames, and the ability to effectively contest the opposition's frames, lie at the heart of successful policy advocacy. Most movements are associated with the development of an innovative master frame that will either constrain or inspire that movement's future development. When the nuclear freeze had to grow beyond armaments, scholars argue, the frame could not accommodate that growth. A frame isn't simply a slogan repeated over and over; rather, it is a conceptual construct capable of helping us organize our world. When frames fail to do so, they are discarded in favor of other frames. But more often, when new facts are submitted that do not resonate with the frames we hold in our heads, it is the facts that are rejected, not the frames.

I. Framing A Message: How to Think About Communications

Continued

We find particularly helpful Deborah Tannen's explanation of how frames work: "People approach the world not as naïve, blank-slate receptacles who take in stimuli …in some independent and objective way, but rather as experienced and sophisticated *veterans of perception* who have stored their prior experiences as an organized mass. This prior experience then takes the form of expectations about the world, and in the vast majority of cases, the world, being a systematic place, confirms these expectations, saving the individual the trouble of figuring things out anew all the time."

Frames are powerful not only because we have internalized them from media, but because they have become second nature to us – they allow us to process information efficiently and get about our lives. The limited number of frames we use allows us to understand new information in terms of stories we already know.

> Finding some familiar element causes us to activate the story that is labeled by that familiar element, and we understand the new story as if it were an exemplar of that old element."
>
> "Understanding means finding a story you already know and saying, 'Oh yeah, that one.'"
>
> "Once we have found (the) story, we stop processing."
>
> Roger Schank, *Tell Me A Story,* 1998

The FrameWorks Institute's perspective on communications, then, is based on the following:

- People are not blank slates
- Communication is interactive
- Communication resonates with people's deeply held values and worldviews
- Communication is frame-based
- When communication is inadequate, people default to the "pictures in their heads"
- When communication is effective, people can see an issue from a different perspective

In this way, the challenge of communications becomes reframing – providing a different lens for the processing of new information. By identifying and empowering rival frames in your communications, you can signal to the public how to think about a given social issue.

But how do you choose between competing frames? How do you know which ones will set up the policy outcomes you wish to promote?

Making that decision requires a a base of research that probes beneath visible public opinion to determine why people think the way they do. This research must help communications directors and advocates choose wisely between competing options on the basis of empirical evidence. Only in this way can advocates feel secure that their individual communications tactics are enhancing the larger goal of advancing policy attitudes and solutions.

I. Framing A Message: How to Think About Communications
Continued

Working from this perspective, the FrameWorks research is designed to explore the following questions:

How does the public think about a particular issue?

What frames are available to them from media, science and advocates' own communications?

What are the consequences of these current frames on public reasoning and policy attitudes?

How can this issue be reframed to evoke a different way of thinking, one that reveals alternative policy choices?

What are the larger values within which this issue should be framed?

Reframes are only possible because ideas and issues come in hierarchies. The cognitive sciences teach us that these hierarchies, or levels of thought, track and direct our thinking. Higher-level frames act as primes for lower-level frames, and higher-level frames map their values and reasoning onto the lower-level frames.

LEVELS OF UNDERSTANDING

LEVEL ONE: Big ideas, like freedom, justice, community, success, prevention, responsibility

LEVEL TWO: Issue-types, like the environment or child care

LEVEL THREE: Specific issues, like rainforests or earned income tax credits

By appealing to higher-level values to reframe, we can signal to people how to think about various social issues. And by testing the ability of certain Level One frames to lift policy preferences on those issues, we can be sure that we are moving people toward consideration of solutions.

Strategic frame analysis adopts the position, now current in several academic disciplines, that people reason on the basis of deeply held moral values, more than on the basis of self-interest or "pocket-book" appeals. When we approach people as citizens, parents and stewards of the earth, we tap into powerful models that guide their thinking about themselves and their political responsibilities. We do this not by playing "identity politics" or forcing people to identify themselves as "environmentalists" or "child advocates," but rather by reminding them of the widely shared Level One values they already incorporate into their thinking about how to make important choices for the world. At issue are words and concepts like "responsibility," "choice," "dependence," "protection," and "stewardship."

Adopting the perspective of strategic frame analysis means understanding that communications is storytelling, but that the stories we tell must have all the elements in place: frames, messengers, evidence, cause and effect. We must tell a story that is about politics, in the sense that it is about the values that drive us to communal action. We must tell a story that invites people into the solution, by demonstrating that solutions exist. We must tell the story with storytellers whom the public believes have no reason to lie to us, and who have authority and knowledge of the issue.

I. Framing A Message: How to Think About Communications
Continued

At the same time, strategic frame analysis runs counter to many communications practices. The story we tell is not one of dueling experts, nor is it told in a highly rhetorical style. The story we want to deliver is not a simple slogan, a “silver bullet,” or a bumper sticker, but rather a set of interrelated stories that resonate with deeply held myths about what it means to be an American.

It is this perspective on communications that informs our work at the FrameWorks Institute and which we share with you with the hope that it helps you raise your issue, broaden your constituency, and secure the policies you need. We also hope that our tools and information, which derive from this understanding of how people process information about social issues, provide you with numerous techniques. This overview is distilled from numerous scholars and practitioners whose work is referenced in the FrameWorks bibliography posted on our Website at www.frameworksinstitute.org.

II. Strategic Frame Analysis & Policy Making

Where Does SFA Fit into Our Strategic Plan?

From time to time after a presentation on strategic frame analysis, a group will ask how to apply this information to achieve their primary task of passing legislation, advancing a policy at the legislative level, convincing a targeted public group that a policy position should be supported, or creating a communications campaign to promote a specific policy position.

This section is presented in an effort to ground the art and science of framing a message in the larger strategy and tactics that your organization must undertake to advance its public-policy resolutions.

Strategic frame analysis is a key building block in the policy-making process and every activity that you undertake in pursuit of policy making. Used effectively, SFA can become the foundation upon which your organization builds its policy-advocacy strategy.

So as not to veer from our primary goal, we will use a simplified model of the public-policy process to demonstrate the benefits of SFA. In this case it is not the steps of the policy process or the model that we want to emphasize, but rather the role of SFA in the process. Accordingly, the use of a standard model of policy making allows us to deconstruct the process to indicate where SFA fits in each step of the policy model.

Let's look at the phases of the policy-making process as traditionally identified in the policy literature.

- Problem identification / gaining agenda status
- Policy formulation and adoption
- Policy implementation
- Policy evaluation / adjustment / termination

In order to illuminate the contribution of SFA to policymaking, we will first discuss policy-making in general, presenting a normative view of the process. We will then shift to a definition that more closely matches the objectives of SFA. Next we will quickly review each policy making phase, culminating with an emphasis on the first phase, where SFA plays such a vital role.

We will use examples from public health throughout this analysis because health outcomes are determined by a wide variety of factors, ranging from individual behavior to medical care to socioeconomic. The decision-making process involved in naming the health problem, and selecting a policy solution and intervention, provides us with excellent examples to use in exploring how SFA interacts with the public-policy process and why SFA needs to be interlaced into your policy efforts.

POLICY MAKING

Typically, policy making is described as an assembly line of the elements required to make policy. First the issue is placed on the agenda and the problem is defined; next the executive branches of government objectively examine alternative solutions based upon factual data, then select and refine them; then the executive agencies implement the solutions while interest groups often challenge the actions through the judicial branch; and sometimes the policy is evaluated and revised or scrapped.

However, scholars of the policy process, including such as Deborah Stone, say that this model fails to portray the essence of policy making, which she describes as "the struggle over ideas" [2002].

> Ideas are a medium of exchange and a mode of influence even more powerful than money, votes and guns. Shared meanings motivate people to action and meld individual striving into collective action. Ideas are at the center of all political conflict. Policy making, in turn, is a constant struggle over the criteria for classification, the boundaries of categories, and the definition of ideals that guide the way people behave [Stone, 2002, 11].

Using Stone's image of policymaking matched against the purpose and objectives of SFA, we can begin to see the importance of framing and how it applies broadly at every level of the policy-making process. We have said that framing is a communications tool that transmits conceptual constructs able to tap into people's deeply held values and beliefs. We have also indicated that behind policymaking there is a contest over conflicting conceptions of the policy based on equally plausible values or ideas.

The question at each step of the process then becomes: *What frame transmits the policy with concepts that represent the values and worldviews of the public, policymakers and other key groups that you need to persuade?* Clearly, framing is the key mechanism that animates the policy process.

For example, the second step in policymaking is policy formulation and adoption. In this step, elected officials, House or Senate committees, or the President's cabinet identify, evaluate and select from among alternative policy solutions. A rational, generally accepted view of decision-making requires the identification of objectives, the prediction of the consequences of alternative courses of action, and finally the evaluation of the possible consequences of each alternative.

However, adhering to the definition of policymaking as a struggle over values and ideas, we can see that a rational step-by-step method for policy formulation based on objectivity, facts and reason is not in common use. Humans use models, metaphors and other techniques to impose structure on the world and to reduce considerations. We use stories and exclude stories as we seek order. Policy formulation as a part of policy making is, once again, nothing more than reasoning by analogy, category and metaphor where those involved, based on their values and views, strategically select the data, facts and information that will be most persuasive in getting others to see a situation as one thing rather than another.

II. Strategic Frame Analysis & Policy Making

Where Does SFA Fit into our Strategic Plan? Continued

A good example of framing in relation to the description of health problems and the formulation of public-health policy is Nurit Guttman's [2000] explanation of the role of values that underlie various health interventions. Guttman explains that public-health interventions are not always chosen because they are effective but because they have a stronger link to certain social values over others [2000].

Health-education strategies that target individuals through persuasive techniques raise the issue of individual autonomy and privacy, because such strategies reduce the ability of individuals to freely choose among options [Guttman, 2000]. On the other hand, regulatory strategies restricting the marketplace or protecting the environment draw on the values of justice and equity and the requirement to provide people an opportunity to live in environments that promote health and minimize risk [Guttman, 2000]. Thus the regulatory restrictive health intervention is inherently associated with the values of self-actualization and the promotion of the public good [Guttman, 2000].

> Various methods or strategies can be employed for the purpose of achieving the goals of a public-health communication intervention. Strategies may include the use of fear-arousal appeals, asking individuals to put social pressure on others, or teaching people skills such as the use of self-monitoring devices…Values clearly play a central role in the choice and application of such strategies…Questions about the morality of coercion, manipulation, deception, persuasion… typically involve a conflict between the values of individual freedom and self-determination, on the one hand and such values as social welfare, economic progress, or equal opportunity on the other hand [p. 80].

Milio, [1981] explains another frame and related underlying values to describe the selection and use of particular public-health strategies and policies.

> The obligation of health policy, if it is to serve the health interests of the public, does not extend to assuring every individual the attainment of personally defined "health." In a democratic society that seeks at least internal equanimity, if not humanness and social justice, the responsibility of government is to establish environments that make possible an attainable level of health for the total population. This responsibility includes the assurance of environmental circumstances that do not impose more risks to health for some segments of the population than for others, for such inequality of risk would doom some groups of people – regardless of their choice – to a reduction in opportunities to develop their capacities [Milio, 1981, p.5].

The key point is that, while policymaking is a process, it is also a human endeavor and as such it is not based on objective and neutral standards. Behind every step in the policy process is a contest over equally plausible conceptions of the same abstract goal or value [Stone, 2002]. Remember, those participating in policymaking are also driven by their belief systems and ideology. These values and ideologies precede and shape the decisions along every step of the policy process.

II. Strategic Frame Analysis & Policy Making

Where Does SFA Fit into our Strategic Plan? Continued

STEPS IN POLICY MAKING

Now let's take a look at how framing plays a role in each step of the process. We will begin with step two in the policy-making process, leaving the first step for closer examination later.

POLICY FORMULATION AND ADOPTION occurs if an issue achieves agenda status. Policy formulation involves analyzing policy goals and solutions, the creation or identification of alternative recommendations to resolve or address the identified public problem, and the final selection of a policy.

> The U.S. Surgeon General, the Centers for Disease Control and Prevention and most public-health experts support exchanging clean needles for used ones as a way to reduce the spread of H.I.V. infections. New Jersey – a state with more than 9,000 orphans who lost their mothers to AIDS, 26,000 people with AIDS, the nation's third-highest rate of intravenous HIV infection and the nation's highest rate of infection among women and children – not only refuses to pay for needles, it used undercover police to arrest those distributing clean needles to prevent AIDS activists from violating the state ban on distributing syringes [Clemons and McBeth, 2002].
>
> Former Governor Christine Todd Whitman (R) was adamantly opposed to needle giveaways, claiming they sent the wrong message to children about drug use. Former President Bill Clinton (D) who admitted the benefits of a needle exchange program, also failed to support the effort due to pressure from the then Republican majority in Congress. [Clemons and McBeth, 2002].
>
> AIDS activists lost this war of ideas that occurred at the policy-formulation stage of the process. Possible policy solutions considered were increased sex education in schools; education about and free distribution of condoms; and the distribution of needles to IV drug users [Clemons and McBeth, 2002].

Facts, reason and objectivity should have induced the elected officials to select a policy of needle exchange. However, these policies invoked a series of images and ideas antithetical to the values of powerful groups in the country such as the religious right [Clemons and McBeth, 2002.]. These same groups then framed the policy solutions in such a manner as to make them "about" the behaviors they recognize – illegal drug use, illicit sex, and addiction – as opposed to the prevention of HIV and the death of women and children. The framing of the problem limited the policy options.

POLICY IMPLEMENTATION occurs within organizations, typically administrative bureaucracies, directed to carry out adopted polices. Implementation at the national, state and local levels, begins once a policy has been legalized through a legislative act or a mandate from an official with authority to set policy. Administrators make decisions about how to deploy resources, human and financial, to enact a policy.

II. Strategic Frame Analysis & Policy Making

Where Does SFA Fit into our Strategic Plan? Continued

The war of ideas and values continues to play out even at this level because administrators must define and put into operation key terms and ideas in the legislative policy. There is often great disparity between the intentions of a policy and how it is carried out. The outcome will be affected by how the policy is interpreted; the values, ideologies, and views of the administrators; and the resources available and selected to implement the policy.

Consider the national policy that overhauled the welfare program during the Clinton administration. The phrase "welfare-to-work" was termed. The President's administration made a great effort to frame the legislation as a means to transition from welfare into jobs that allowed the recipient to establish a means of livelihood. Values expressed in this case might have been "doing-no-harm," or self-actualization.

But later, in the execution of the legislation, some states emphasized the transition off of welfare to jobs, while others chose to see the policy simply as a call to decrease welfare rolls. The values invoked in these kinds of programs might be described as market autonomy, utility, or efficiency.

Let us also reflect on the public-health mandate to decrease smoking as enunciated by the Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services in Healthy People 2010 www.health.gov/healthypeople. The goal is to reduce by 12% the number of adults over age 18 who smoke. The target date is 2010.

The Healthy People 2010 Website provides information for individuals on how to stop using tobacco. The federal agency also invested in public-service announcements featuring Bill Cosby on a variety of topics including the tobacco issue, where he admonishes individuals about the dangers of smoking. No mention is made on the Website of marketplace regulations or structural remedies, such as the tobacco lawsuits, banning smoking in public places, or the marketing of cigarettes.

Guttman [2000] says that, consciously or unconsciously, the implementation of public-health communication interventions involves the application of values. For instance, the execution of stop-smoking programs at the individual level assumes that individuals should be responsible for the solution to health problems and simply need to improve their refusal skills. On the other hand, the decision to implement a program at a societal-structural level identifies the locus of solution as external to the individual.

> Social problems are time-, place- and context-bound. The way the health issue is framed as a problem (or not) is likely to reflect certain priorities or ideologies of the more dominant stakeholders. The mere identification of the problem itself presents a value judgment: the particular view of the ideal state is what determines what is considered problematic, thus requiring action. Is the problem conceived as poor motivation on the part of individuals who do not adopt recommended practices? Perhaps the problem is a result of structural socioeconomic conditions such as limited access of smokers to smoking-cessation programs. …The locus problem can be identified at different levels, as a lifestyle issue versus an issue mainly associated with societal structures and distribution of resources [p.74].

POLICY EVALUATION

The final stage of the policy process determines what occurred as a result of the selection of a policy and makes corrections in the current policy or program as needed. Essentially, the final stage of the policy process assesses what has occurred as a result of the implementation of the legislative policy.

Just as there is no escape from values into an objective, fact-based mode for selecting one policy in lieu of another, there is also no neutral, rational, objective way to measure and calculate the benefits or harms resulting from a policy. All the same considerations of values-based framing come into play in this seemingly "objective" phase as well.

When beginning to evaluate a policy, several pieces of information must be established: the goals or original objectives of the policy, a means by which to measure the extent to which goals have been met, and the target of the program or whom the program was intended to affect.

Assembling this information involves value-laden decision-making including the views, and values of the organizations involved; the analysts, clients or the target population; and the general public, who may be paying for the program with their tax dollars.

When assembling the indicators of success for a policy evaluation, priorities and values become important. A particular indicator that may gauge success by one value-laden goal [efficiency] may not capture the success of the policy for another goal [community solidarity] [Guttman, 2000].

An example provided by Deborah Stone shows us how a value-laden evaluative criterion figures in something as seemingly straightforward as measuring the efficiency of a library [Stone, 2002]. Scholars agree that an efficiently run library is one that builds up a good collection of books and that a particular library in California might be more efficient if it replaced some highly paid professionals and spent the money on building the collection of books [Stone, 2002].

It is possible to imagine several challenges to the evaluative criterion of efficiency. Some citizens may value the resources available in the library in the form of storytelling for children, or jobs for teenagers [Stone, 2002]. Some might debate what a "good book collection" might include [Stone, 2002]. Finally, others might say an efficient library is one that would save the users time by providing the maximum amount of assistance while the patron is using the services [Stone, 2002].

On the use of efficiency as an evaluative criterion, Stone says it "is always a contestable concept. To go beyond the vague slogans and apply the concept to a concrete policy choice requires making assumptions about who and what counts as important. The answers built into supposedly technical analyses of efficiency are nothing more that political claims" [p. 65]. "By offering different assumptions, sides in a conflict can portray their preferred outcomes as being most efficient" [Stone, 2002 p.66].

Ultimately, *evaluation* of a policy becomes nothing more than a selection among criteria based on values and ideologies. In the example below, one can see clearly how the selection of the evaluation criterion extricates different values.

> [In] … an intervention to prevent adolescent pregnancy that chose the strategy of persuading adolescent girls to use a contraceptive implant, a likely evaluation criterion would be the relative frequency of pregnancies before and after the intervention in the target population. For stakeholders who define the problem as based on sexual promiscuity or for those who believe the girls engage in abusive sexual relationships because of low self-esteem however, this criterion would be irrelevant because these adolescent girls may continue to engage in premarital sex and may have simply adopted enhanced contraceptive practices. Stakeholders who are interested in preventing youth from being infected with sexually transmitted diseases are not likely to find this criterion satisfactory. The contraceptive implant may protect the adolescents from pregnancy, but they may continue to be exposed to infection [Guttman, 2000].

PROBLEM IDENTIFICATION/GAINING AGENDA STATUS

We saved the first step in the policy process for last because it is here, more than at any other stage, that framing becomes critical. The first step involves getting a problem onto the radar screen of the legislative body that must deal with that issue [Clemons & McBeth, 2001]. Problems gain legislative attention in many ways, but typically gaining agenda status happens once there has been a value-driven, subjective determination that an issue is now a "public problem."

The question then becomes: Why do some issues become public problems reaching agenda status and others do not? The answer has to do with frame construction in the sense that an issue must be constructed so that it is perceived as qualifying as a social problem (Best, 1995). This is a key objective in getting the attention of the legislative body in charge. This assertion is derived from the notion that issues get attention when they are labeled as social or public problems (Best, 1995).

How an issue becomes labeled as a social problem is not based entirely on objective measures of the severity of the condition but rather on a host of factors related to how society perceives or constructs the information presented regarding the issue (Best, 1995). Accordingly, SFA is applied to help determine the organizing constructs or values that may be used to frame an issue in order to make it known as a social problem that then captures the minds and concerns of the public and its elected officials.

First, a few ideas on why a social condition is not automatically considered a social problem and why it must be considered as one before it can become a legislative priority.

Joel Best asserts that until something is labeled a "social problem" it does not rise to a level of importance sufficient to attract the attention of the public and policymakers. His view is called the subjective, constructionist perspective because it says a social condition is a product of something defined or constructed by society through social activities (Best, 1995).

II. Strategic Frame Analysis & Policy Making

Where Does SFA Fit into our Strategic Plan? Continued

For example, when a news conference is held on crack houses or a demonstration on litter, or investigative reporters publish stories, or when advocacy groups publish a report, they are constructing or framing the issue using claims that help build the issue into a social problem.

Malcolm Spector and John Kitsuse [1977] use the term "claims making" to define the activities of individuals or groups making assertions of grievances and claims with respect to some putative conditions that result in social problems.

According to all of these definitions, it does not matter if the objective condition exists or even if it may be severe. It only matters that people make claims about it in a way that invokes a subjective mental construct that will frame the issue as a public problem of magnitude worthy of attention. In other words, social problems are the result of claims-making that frames the issue in a way that triggers organizing principles attached to an individual's deeply held worldviews and values (Best, 1995).

Claims-making draws attention to social conditions and shapes our sense of the nature of the problem (Best, 1995). Through rhetoric, every social condition can be constructed as many different social problems. A claims-makers' success [or framing] depends in part upon whether the claims persuade others that X is a social problem or that Y offers the solution (Best, 1995).

In the area of public health, the construction of a problem explicates embedded values and ideals of those who "made" the health problem in the first place [Guttman, 2000]. The results of that construction further determine whether the problem gets on the agenda, as well as the range of policy solutions that appear natural or appropriate. For instance, using claims that frame the problem at the organizational level assumes a major cause of the problem is based in organizational arrangements or practices [Guttman, 2000]. The problem of an overweight America is defined as people's lack of time or facilities at work to exercise, or an absence of food at work that is high in nutritional value [Guttman, 2002].

Identifying the problem of overweight adults at this marketplace level may involve a frame that links the problem to industry's quest for profits through the marketing of inexpensive food products high in calories instead of nutritious products that are more expensive and thus made less accessible [Guttman, 2002]. In this instance, the description of the problem involves a frame including claims that value the public good over market autonomy.

In order to evaluate the relative merits of different frames applied to the social problems we wish to take into the policy process, we need to ask the following kinds of questions: Would such a frame make this problem a public issue that gets the attention of a legislature? In the instance above, involving the problem of obesity, we would ask: If the issue is framed in this way, would the legislature then consider marketplace restrictions on advertising or regulations on food content?

II. Strategic Frame Analysis & Policy Making

Where Does SFA Fit into our Strategic Plan? Continued

THIS PRESENTATION WAS MEANT TO LEAVE YOU WITH TWO "TAKE HOME" LESSONS.

1. Strategic frame analysis [SFA] is a critical tool in the larger public-policy strategy that your organization must implement in order to eventually win approval for your policies.
2. The use of SFA animates the public-policy process because policy making, like SFA, is driven by subjective value systems, worldviews, and ideas.

This section was developed for the FrameWorks Institute and the Center for Communications and Community/UCLA by Lauri Andress, MPH, JD, Texas Program for Society and Health, Rice University and Doctoral Candidate, University of Texas School of Public Health.

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CONTEXT

WHAT RESEARCH SUGGESTS ABOUT THIS ELEMENT OF THE FRAME

- Context establishes the cause of the problem and who is responsible for solving it.
- Context can further systems thinking and minimizes the reduction of social problems to individual solutions.
- Context must be built into the frame with the introduction of the problem.

Context is one of the most difficult elements of the frame to describe, and one of the most important to get right. In FrameWorks trainings, we explain context by first showing the group a picture of cows chewing grass in a field. We explain that some cows are getting sick, and we ask the group to speculate about the cause. Invariably, people work within the frame that has been given them; they ask if the farmer gave the cows bad feed, or if the farmer is experienced, or if the cows have wandered into an adjacent field, or if the cows caught a disease from other cows. We then add a backdrop that shows an urban landscape, with smoke stacks belching fumes just over the cows' heads, and we ask the group again: Why do you think the cows are getting sick? This time, of course, they are able to broaden the scope of their speculation to include environmental causes, and to ask about the relationship of the cows to their air, water and soil. This exercise brings home the importance of getting context into the initial definition of the problem.

Context provides more than details about individuals; it focuses on issues and trends that are common to groups. And to identify trends requires systems-level thinking. This means that you must be strategic in identifying the problem you want to communicate as one that involves the entire community. The way you identify the problem makes all the difference in how people are able to view your solutions. When people understand issues as *individual* problems, they may feel critical or compassionate, but they won't see *policies and programs* as the solutions. For example, the dominant frame for children's issues is a needy child and a parent, and this two-person frame sets up the idea that the parent, and the parent alone, is responsible for the child's needs. However, if you provide context and broaden the frame to include other parents, the community, business leaders, the mayor, etc., you define the problem as public in nature and expand the possibilities for meeting children's needs.

To go back to the FrameWorks training example, systems-level thinking forces us not to view the cows within the narrow frame of the field and the farmer. It gives us more options in defining the problem and in creating appropriate solutions. Without systems thinking, we are forced into narrow solutions: "Fix the parents in order to fix the kids."

Context is one of the missing ingredients that distinguish episodic from thematic reporting, important distinctions for community advocates to understand. Stanford University political psychologist Shanto Iyengar explains that "the essential difference between episodic and thematic framing is that episodic framing depicts concrete events that illustrate issues, while thematic framing presents collective or general evidence." Episodic reporting is heavily reliant on case studies, human-interest or event-oriented reporting, and depicts public issues

as the plight of an individual homeless person, an airline bombing, etc. By contrast, thematic coverage places the individual incident within long-term or national trends. It explores causes and effects, and explains, rather than dramatizes. Context defines an issue as "public" in nature, and therefore appropriately solved in the realm of policy.

PUBLIC-HEALTH EXAMPLE

The City of Houston had a measles epidemic in the late 1980s. Initial media coverage tended to focus on each case or each episode – the age of the child, the situation of the parents, their ethnicity or health status. When the epidemic moved beyond the 50th case with no clear end in sight, the reporters looked for new angles. It was at this point that the tone of the stories became thematic. For example, stories began to examine how the City of Houston health department paid for vaccines. This provided a wider focus that helped to expose the issue of pharmaceutical pricing, as well as manufacture and supply of vaccines. The story began to focus on limited resources for free immunizations. The measles epidemic in Houston became a part of a larger national issue. By connecting the Houston epidemic to a larger context, Houstonians began to perceive the complexity of their epidemic and related issues. The problem of measles thus had two solutions – one individual in nature [vaccinations] and the other public policies to address the supply and pricing of vaccine.

VIOLENCE-PREVENTION EXAMPLE

One of the best experiments in the use of context comes from the violence-prevention arena. In comparing the distance between the way public-health advocates understood violence prevention and the way media depicted it, researchers were able to identify the missing contextual elements of the story. Crime coverage was highly episodic, stressing randomness rather than root causes and suggesting criminal-justice remedies rather than preventive policies. Researchers sought to replace this kind of coverage with a public-health model: "Each violent incident that takes place in a community has more of the characteristics of a deadly communicable disease than of an isolated event involving the individual participants." To redirect public-opinion toward public health remedies, the researchers suggested that reporters ask and report on the following questions: (1) Where did the perpetrator get the weapon?; (2) Did the victim and perpetrator know one another?; (3) Were alcohol or drugs involved?; and, (4) What were the consequences and costs of incarceration to their families, to society? The thinking was that if these questions were woven into the article, crime would be contextualized and lead to the consideration of policy options. (see Berkeley Media Studies Group. January 1997, Issue 1. Berkeley: Berkeley Media Studies Group).

III. Thinking Strategically About Framing

Elements of the Frame Continued

HOW TO USE CONTEXT EFFECTIVELY

- Link current data and messages to long-term trends.
- Interpret the data: Tell the public what is at stake and what it means to neglect this problem.
- Define the problem so that community influences and opportunities are apparent – connect the dots, both verbally and in illustrations.
- Focus on how well the community/state is doing in addressing this problem, not on how well individuals are addressing it.
- Connect the episodes of your community's issues to root causes, conditions, and trends with which people are familiar.
- Assign responsibility.
- Present a solution.

NUMBERS

WHAT RESEARCH SUGGESTS ABOUT THIS ELEMENT OF THE FRAME

- Once a frame is established, it will "trump" numbers.
- Most people cannot judge the size or meaning of numbers; they need cues.
- Numbers alone often fail to create "pictures in our heads."

An important finding from the cognitive sciences is the ability of the frame to overpower the numbers that follow. In other words, if the facts don't fit the frame, it's the facts that are rejected, not the frame. Confronted with facts that one might presume would cause the group to reconsider its position, people opt instead to adhere to their original position and to ignore the conflicting data.

As many have come to realize, both numbers and narratives evoke frames. The trick is how to combine them so that they work together to evoke a frame of collective responsibility and public policy. Here are some simple suggestions for integrating narrative and numbers:

First, never provide numbers without telling what they mean. While scientists concerned with objectivity may feel it important to "put the numbers out there and let the facts fall where they may," they are setting the stage for public misunderstanding, public boredom, or public manipulation by those who do not hold back from interpretation.

Moreover, the ratio of numbers to narrative should be relatively low. Embed the statistics in a tight little story that tells what is happening, how big a problem this is and what can and should be done about it.

ENVIRONMENT – WEAK EXAMPLE

At current consumption rates, we put back in the air each year about 100,000 years of stored carbon. In the last 150 years we have put about 290 billion tonnes (gigatonnes or Gt) into the air. Amidst the claimed uncertainties about the climate-change phenomenon, there is no dispute that these emissions have caused significant increases in atmospheric concentrations of CO2. Today's CO2 levels are about 370 parts per million (ppm), about 30 percent higher than the pre-industrial level of 280 ppm.

ENVIRONMENT – BETTER EXAMPLE

Humankind is altering the atmosphere at a rapid pace. Since industrialization began just 150 years ago, concentrations of carbon dioxide in the atmosphere have increased by almost one-third. This is happening because burning fossil fuels releases carbon into the atmosphere, carbon that it took the Earth millions of years to bury away. Each year we are using 100,000 years worth of stored carbon. Even once we shift away from fossil fuels, it will take centuries for Earth to store the carbon away again.

Second, try to provide the interpretation first, then the data. That way, your numbers connect to an idea. By raising the broader principle first, you allow people to hear your numbers as evidence, not as raw data.

CHILDREN'S ORAL-HEALTH EXAMPLE

"Community fluoride protection costs less per person than a single filling. Water fluoridation is one of the best public-health investments we can make. Every $1 invested in community-water fluoridation in yields annual savings of $38 in dental treatment of cavities." (*Centers for Disease Control and Prevention)*

It is imperative that those who seek to engage and educate the public find ways to help people imagine the reality the numbers represent, so that they can appropriately assess what's at stake. The Advocacy Institute and Berkeley Media Studies Group have pioneered an approach to communicating statistics that they call "social math." By this, they mean "making large numbers comprehensible and compelling by placing them in a social context that provides meaning.

PUBLIC-HEALTH EXAMPLE

"The correlation between violent media and aggression is larger than the effect that wearing a condom has on decreasing the risk of HIV,…larger than the correlation between exposure to lead and decreased IQ levels in kids,…larger than the effects of exposure to asbestos, larger than the effect of secondhand smoke on cancer." (*Brad Bushman, Professor of Psychology, Iowa State University)*

INTERNATIONAL EXAMPLE

"Two years ago in Nigeria, an AK-47 could be had in exchange for two cows. Now the price is down to one cow. And in the Sudan, you can get an AK-47 for a chicken." (*Marie Griesgraber, Oxfam America)*

HEALTH EXAMPLE

In the following quote, Surgeon General David Satcher helps bridge from a familiar issue, already deemed a public-health crisis, to one he would like to propel onto the public agenda; that is, he makes the link between medicine and dentistry and implies that dental care is just as important as medical care:

"There are 100 million people in this county without access to fluoridated water and over 100 million people in this country without dental health insurance. For every child who is uninsured for medical care, there are two to three children who are uninsured for dental care…."

"Few Smiling About USA's Dental Health," *USA Today,* October 9, 2000

III. Thinking Strategically About Framing

Elements of the Frame Continued

HOW TO USE NUMBERS EFFECTIVELY

- Use numbers sparingly. When you use dramatic numbers, you may have the inadvertent effect of making the problem seem too big, too scary, or too far away.
- Provide the meaning first, then the numbers. Use social math to reinforce that meaning.
- Use numbers strategically: not simply to establish the size of the problem, but to convey the cost of ignoring it.
- Use numbers to underscore efficacy, demonstrating cost-effectiveness.

MESSENGERS

WHAT RESEARCH SUGGESTS ABOUT THIS ELEMENT OF THE FRAME

- The choice of messengers is as important as the message itself.
- The message is reinforced or undermined by the choice of messenger.
- Knowledge and trustworthiness are critical to public acceptance, not likeability or familiarity.
- Some messengers are not credible on certain issues because we assume they are biased toward a perspective.
- Unlikely allies can prompt public reconsideration of an issue or recommendation.
- Some messengers convey specific frames.

Choice of messenger is one of the most important tactical choices to be made before taking an issue public. Messengers are the people who become the physical symbol of the issue — they sign op/eds, appear at news conferences and before civic groups, speak on TV and radio talk shows, and testify at hearings. They answer the question, "who says this is a problem I should pay attention to?" Messages can be reinforced or undermined by their attachment to a spokesperson. Skill is required in matching the message to the messenger, and in anticipating the impact of particular messengers on public thinking.

The problem inherent in the choice of messenger is that, without a careful appraisal of the match of messenger and message, you are likely to reinforce one of these negative roles for the public, inadvertently allowing the public or critics to dismiss their testimony. In our research on global warming, for example, environmentalists were less credible than those who were not perceived as having a vested interest, or suspected of being "extreme" on environmental issues. On children's oral health, dentists were deemed less objective than pediatricians or school nurses. Does this mean that environmentalists and dentists should quit advocacy? No, that's not what we're suggesting at all. But the choice of the lead spokesperson, the surrogate for the issue, should be made tactically, taking into account the way the public is likely to read the combination of the message and the messenger. How, then, should they weigh in on the issue? They can wield their professional authority in support of the out-front spokesperson.

Finally, messengers convey authority. They help establish the boundaries of the conversation, just as do other frame elements. The choice of public officials as spokespersons on foreign-policy issues, for example, signals to the public that ordinary people should leave the discussion to experts. In one study of foreign-policy news coverage, FrameWorks found that the only time ordinary people were used in the news was when the story was about their lack of knowledge of international issues or about their lack of interest. The messengers were chosen specifically to reinforce the frame.

PUBLIC-HEALTH EXAMPLE

In Texas, the local public-health officers sought to influence the allocation of resources in the legislature to obtain additional dollars for public health. That year all of the speakers at legislative hearings were directors of local and county public-health departments. Later, many legislative aides and their bosses said that the testimony did not help persuade them because these individuals were seen as having a vested interest in obtaining more money for their departments instead of as representing the public-health needs of their jurisdictions. While listening to the testimony and thinking about it later, the legislators could not hear the truth of the words because the messengers were discounted.

HOUSING EXAMPLE

In a now famous advocacy effort, organizers helped mothers in Chicago's public housing (the Henry Horner Mothers Guild) create a video documenting the slum conditions that had been allowed to continue without the city's intervention. The mothers themselves narrated the film and served as "tour guides" through the Project, effectively establishing themselves as responsible tenants, not victims. The mothers were portrayed as articulate, responsible and organized. The city, by contrast, was portrayed as a derelict, negligent landlord. Not only did these messengers provoke sympathy, but they commanded respect for fighting back against injustice. The short video was delivered as a video news release (VNR) to TV stations in Chicago and widely used; in effect, these messengers stayed in control of their own story.

CHILDREN'S ORAL-HEALTH EXAMPLE

Because dentists are perceived as too vested in dentistry to be objective about the issue of children's oral health, other messengers needed to be identified. In the Washington State "Watch Your Mouth" campaign, pediatricians and school nurses were used effectively as the advocates for better oral-health policies. In both cases, these messengers brought important framing connections associated with their professions. Pediatricians helped emphasize that oral health is part of overall health, a problem identified in the communications research. And school nurses took the issue into the schools, connecting health to achievement and, further, to the locus of public responsibility for children. Both messengers were unexpected, knowledgeable, trustworthy, and furthered additional framing goals.

HOW TO USE MESSENGERS EFFECTIVELY

- Use messengers who reinforce the systemic connection and underscore the severity of the problem.
- Use spokespeople who establish the problem as one that is public in nature.
- Test your chosen messengers for public perceptions of their knowledge and trustworthiness.
- Consider carefully the symbolic value of your chosen messengers – business executives bring the frame of managerial competence, innovators bring a solutions frame, etc.
- Use unlikely allies.
- Use advocates and those closest to the issue carefully, understanding the public's assumption that they are already vested in the issue.

VISUALS

WHAT RESEARCH SAYS ABOUT THIS ELEMENT OF THE FRAME

- Pictures trigger the same models and frames as words.
- Pictures can undermine a carefully constructed verbal frame.
- Pictures are visual short hands.
- Close-up shots emphasize the personal and conceal environmental and systems-level influences.
- The narrower the frame, the less opportunity for systems-level thinking

We have been concentrating on words and how they trigger models and frames. But don't underestimate the power of visuals. After all, it has been said, "a picture is worth a thousand words." Pictures trigger the same mental models and frames as words. It is important to be aware of this, so that the frames introduced by the pictures do not work against the frames introduced by the words. Advocates often say that they cannot control the pictures at news conferences, but to some extent they can—in the way they stage the news conference and in what they suggest to the media as the visuals to accompany the story. Furthermore, advocates produce many other vehicles – such as Websites, advertising, brochures, fact sheets, action alerts and reports – in which they can control all the visual elements—and therefore the messages they send.

What, then, are the factors to consider when planning a visual, whether it is a film clip, photograph, illustration, or graphic (including maps and charts)? First, it's important to anticipate the visuals or symbols that will be applied to your issue if you do nothing to control them. More than likely, these will be generic images and will trigger frames that are traditionally associated with that issue. These stock images can reinforce stereotypes, emphasize dramatic episodes and details to the detriment of context and trends, exclude solutions and disperse accountability.

Second, recognize that choosing the "right" visual is only the first step. Even image placement can reinforce or undermine your message. When you orchestrate a series of dire-problem pictures and leave the solutions photos to the end, you promote a frame of despair or intractability, regardless of what your word frames attempt to convey. Location, size, and color can all affect the impact of your visuals. Images seem more important when they are centered, in the foreground, brightly colored, sharply defined, or overlapping with other elements. Human figures, cultural symbols or icons also signify importance. Consider the layout of your document as a whole, or the sequencing of your photos on Websites and in film and video.

III. Thinking Strategically About Framing

Elements of the Frame Continued

YOUTH EXAMPLE

FrameWorks' research suggests that showing youth involved in sports, volunteer, and extracurricular activities like performance arts can overcome the default frame of the lazy, self-centered teenager. Assessments of youth shown involved in these activities were universally positive. "When I see a girl in sports, I immediately think she has a chance to succeed in life," explained a father of a teen in a focus group conducted for FrameWorks. Reacting to a picture of a young boy volunteering at what appeared to be a soup kitchen, one mother commented, "He is going to be an asset to his community just because he is already at a young age involved in community."

CHILDREN'S ORAL-HEALTH EXAMPLE

When the illustration for children's oral health is a parent and child, or a dentist and a child, community-wide and policy efforts to improve oral health are hard to visualize. Perhaps the cleverest use of visuals to advance children's oral health comes from the Sierra Health Foundation's news conference to call attention to the Surgeon General's Report on Oral Health. The foundation supplied new B-roll (background footage) to local news stations that featured drinking water coming out of the tap and showed pie charts of trends in fluoridation across California counties. Another strategic decision made by the foundation was its choice of location for the news conference: the State Capitol. Even though no legislation was pending, the reporter delivered the news with the Capitol as backdrop, reinforcing the notion that the issue under discussion was authentically a public responsibility.

HOW TO USE VISUALS EFFECTIVELY

- Avoid traditional images that have dominated the news regarding your issue.
- Avoid close-up shots of individuals unless they serve your framing goals, as they tend to assign responsibility to those individuals.
- Suggest the public nature of the problem with pictures of public and community settings.
- Use sequence and placement of photos to demonstrate cause and effect, and trends instead of isolated events.

METAPHORS AND SIMPLIFYING MODELS

WHAT RESEARCH SUGGESTS ABOUT THIS FRAME ELEMENT

- Metaphors and models complete ways of thinking that include patterns of reasoning.
- They allow us to make extensive inferences beyond the words actually used.
- They are highly quotable for news media.
- They offer effective alternatives to other storytelling devices.

According to researchers associated with Cultural Logic, numerous studies in the cognitive sciences have established that both the development and the learning of complex, abstract or technical concepts typically rely on analogies. "An explanation that reduces a complex problem to a simple, concrete analogy or metaphor contributes to understanding by helping people organize information into a clear picture in their heads, including facts and ideas previously learned but not organized in a coherent way," says psychological anthropologist Axel Aubrun. Once this analogical picture has been formed, it becomes the basis for new reasoning about the topic. Better understanding also leads to an increase in engagement and motivation.

Cognitive linguist George Lakoff introduces the notion that frames derive from a vast conceptual system whose unit is metaphor. "Metaphors as linguistic expressions are possible precisely because there are metaphors in a person's conceptual system." The systematism of this vast conceptual framework allows individuals to understand new information in the context of what they already know to be familiar, and to reject information that does not fit. "Metaphors may create ... social realities for us," according to Lakoff and Johnson (1979:10). "A metaphor may thus be a guide for future action. Indeed, their very purpose is to connect random information to myths, ideologies and stereotypes that allow the individual to process and store the new with the old. In this sense, frames reinforce worldview (Lakoff, 1996: 374).

ENVIRONMENTAL EXAMPLE

"The problem is that some people think we're motorcycles without engines, but the truth is that we're like hikers on wheels."
Gary Sprung, Director of a mountain-biking group as quoted in "Mountain Bikers Up Against Calif. Conservationists," *The Washington Post,* October 2, 2002, A3.

The metaphors chosen to describe the issue drive public reaction and reasoning. For example, the "horse race" metaphor applied to political elections has been shown to reduce attention to specific issues in favor of character, strategy and poll results

Because every word that we speak, and every image that we produce, is linked in different ways to many frames and models (words and images in fact trigger the models), language and imagery will always manipulate. That is unavoidable. By bringing a level of analysis to these metaphors and models, however, advocates will be less likely to be caught by correspondences or conclusions that are evoked by the language and imagery we or someone else use, but that in fact work against the policies or positions we are advocating.

III. Thinking Strategically About Framing

Elements of the Frame Continued

Often, when advocates take on an issue that is well established in the public discourse, they find they must evaluate and address the metaphors and models most closely associated with that issue and their unintended consequences.

CHILDCARE EXAMPLE

Lakoff and his colleague Joseph Grady have demonstrated that, when adults think of children as "precious objects," childcare is often conceptualized as a container that provides protection for the child. This, then, takes on a number of pernicious "entailments," or consequences, that come bundled with the metaphor and infect our reasoning:

CHILDCARE AS CONTAINER FRAME	
Childcare center	Container
Children	Packages
Leaving children at center	Putting objects in a container
Caring for children	Handling objects
Childcare workers	Package handlers

All of this reasoning is hidden from both the reasoner and the observer. Yet it is precisely this hidden process that yields an overt opinion that there is no problem with paying childcare workers low wages. Once the mental mapping has taken place, the reasoner is able to quickly sort through any new information and to come up with a "logical" assessment.

ENTAILMENTS OF THE CHILD CARE CENTER AS CONTAINER FRAME

If childcare is package handling:

- Is it a highly skilled job?
- Do you need to hire highly skilled workers?
- Does it pay workers well?
- Does it need to pay well?
- Does the environment at the facility matter?
- Do the relationships between handlers affect the package?

Hence, the difficulty of getting "quality" into the public debate over daycare, as it is currently conceptualized. The power of the metaphor is that it effectively shuts some considerations out of the frame, and highlights others – safety, for example, is in the foregrounded in this metaphorical reasoning.

Simplifying models are a kind of metaphorical frame that both capture the essence of a scientific concept, and have a high capacity for spreading through a population. Teaching with analogies is a familiar strategy in educational contexts. Common examples of analogies that serve to teach basic science concepts include "the heart is a pump," "the eye is a camera," "the cell is a factory," "the kidney is a waste filter," "photosynthesis is like baking bread," "an electric circuit is like water circuit," "the brain is a computer," etc.

An example from the advocacy literature helps us understand the power of these "simplifying models." In talking with hundreds of people about how they think about air quality and climate, Cultural Logic researchers Axel Aubrun and Joe Grady identified the dominance of one particular model that served to anchor their understanding about ozone depletion.

III. Thinking Strategically About Framing

Elements of the Frame Continued

There is no reason that ozone depletion should have more salience and energy behind it as an issue than global warming or water pollution. Yet it does. Aubrun and Grady conclude that it is because of the simplifying model "the ozone hole in the atmosphere is like a hole in the roof." As they point out, the fact that you have a hole in your roof makes other policy distractions less viable. When politicians tell you that you might lose your job or your economic well-being if you stop to fix the ozone problem through environmental regulation, this makes little sense to people. Why? Because the two consequences are seen as false trade-offs. If you have a hole in your roof, you don't go out and take a job and ignore the roof; you have to fix your roof. By contrast, Aubrun and Grady found that "global warming," while highly visualized by people and somewhat understood, suffered from having no working model in people's minds. Simplifying models are easier for nonspecialists to understand than the science from which they are drawn. They yield a sketch, rather than a fully detailed and complex drawing, but they still educate in the right direction, when used ethically.

Metaphors and simplifying models help us understand a problem and its associate solutions by giving us a simple way of understanding how something works.

INTERNATIONAL EXAMPLE

When Congressman Joe Lieberman wanted to question President Bush's leadership on global environmental treaties, he used a metaphor:

"Bonn surprised people…The feeling was that, if the United States took its football and left the field, the game wouldn't go forward. But the rest of the nations of the world found their own football, and they completed the game. They left the United States on the sidelines."
Joseph Lieberman, *Los Angeles Times*, July 25, 2001

In order to analyze the impact of this metaphor, advocates should evaluate the following questions:

ENTAILMENTS OF THE PRESIDENT AS TEAM LEADER FRAME

- What kind of player takes the football and leaves the field?
- What kind of player sits on the sidelines?
- Is this player a leader?
- Would you want this player on your side?
- Would you entrust your country/world to such a leader?

USING MODELS & METAPHORS EFFECTIVELY

- Use metaphors and models to help people understand how your issue works.
- In general, use metaphors and models that connect the issue to larger systems.
- Use metaphors and models that emphasize prevention and/or causality.
- Examine carefully the entailments of metaphors being used to communicate about your issue – you may be able to identify vulnerabilities in the metaphor. But be careful in examining the entailments in the reframing metaphors you develop as well.

TONE

WHAT RESEARCH SUGGESTS ABOUT THIS ELEMENT OF THE FRAME

- People toggle between a "rhetorical mode" and a "reasonable mode" of thought and discourse on this issue.
- Rhetorical mode polarizes people, turning many off, and is characteristic of much political and media discourse.
- Reasonable mode, which reflects more typical individual thinking, makes people more open to scientific findings and practical problem-solving.
- Extreme statements and partisan attacks turn many potential supporters off and do little overall to increase support for solutions on the issue.
- Advocates often lose credibility when they talk in highly partisan terms.
- The label "advocate" itself is somewhat polarizing, since it sometimes suggests dogmatism and a one-issue identity.

The tone of the communications can provide powerful cues capable of effectively and efficiently communicating (or hijacking) a frame. Choosing and controlling tone, then, is as important as deploying more obvious frame elements such as messengers, visuals, or metaphors. Since we can't readily predict which element of the frame is likely to strike the audience first, we need to control all elements. If the visuals, messengers, metaphors, and tone of the communications have all been carefully constructed to work together, the odds increase that the communications will connect to the desired existing internalized frame.

What exactly is tone and how does it qualify as a frame element?

Tone refers to the style, mood, manners or philosophical outlook of a communication: shrill, liberal, moderate, abrasive, etc. We owe this observation to our colleagues at Cultural Logic, who first brought this element to our attention. On social issues, we identify two categories of tone: reasonable and rhetorical.

As Cultural Logic points out,

- People can be both reasonable and opinionated on any given topic.
- When they are in "reasonable mode," they are more likely to be open to new information and to problem-solving.
- Rhetorical mode is more overtly political or ideological. It reminds people of their hardened positions and political identities, if they have them, and turns many people off.
- Experts and advocates lose credibility when they talk in rhetorical mode, as this violates the "disinterested" requirement for effective messengers.

Recent FrameWorks research – including cognitive elicitations, focus groups and the priming survey – was consistent in showing that when communications about the environment become too extreme, too dire, or too partisan, large segments of the public are likely to tune out and dismiss the message, and few new converts are likely to be made. A subsequent survey tested the impact of tone explicitly. The results were stunning. When we framed

environmental issues by reminding people that the Administration was full of oil-company executives or that Congress was in the pocket of the auto lobby, we lost on average 9 points over the same critique, but framed more neutrally to emphasize the need for long-term, not short-term, planning and incentives for innovation. The lesson is simple: On those issues where many people already see themselves as falling on one side or the other, and when they get cues that the dialogue is about that divide, they stop thinking about the issue itself, and start thinking more generally – and usually less productively – in terms of their own political or factional identities. Even potential supporters may be turned off by overtly political discussions and made skeptical by melodramatic warnings.

When people are presented with a reasonable discussion of the problem, its causes and the potential solutions, they are much better at listening to and using new information. Their "decent person" instincts kick in and they begin thinking about how to solve the problem rather than how to identify the hidden agendas of the messengers. Engaging Americans in "can do" thinking is especially effective. Strongly worded or overtly partisan rhetoric may energize the partisan base and get the attention of policymakers, but it is ineffective as a tool for moving most Americans toward solutions-based thinking on specific issues like child and family policy.

Why does tone work this way?

We owe to our colleague Pamela Morgan an explanation of this phenomenon. Put simply, rhetorical tone communicates the frame "politics." What do we know about the internalized frames people hold about politics? For most people, there are very few positive frames associated with politics. Politics is a cynical, manipulative game. It's a horse race where people will say (or do) anything to win. To say that something is "just politics," for example, is to undermine the reality of the issue or the position. In effect, by using the rhetorical tone, you communicate to your audience that the specific issue position you espouse is largely a pawn in the old political game of them versus us. In order for your audience to decide how to process your communication, then, all they have to do is decide whether you are one of us or one of them. Cognitive connection made. End of opportunity for political learning.

How does this play out in practice?

Communicators fall into the trap of using rhetorical tone when they say things like:

- We accuse the Administration of breaking its promise to invest in education.
- The President has betrayed our trust by revoking his commitment to early education.
- The legislature is squandering the taxpayers' resources on the military instead of investing in our long-term homeland needs.
- The governor is raiding the tobacco-settlement piggybank to fund his agribusiness friends, not poor families.

These statements strongly imply a motive on the speaker's part, as well as on those attacked. The motive appears to be "politics as usual" and is more likely to communicate that frame than the ones the speaker had intended: corruption, betrayal and dishonesty.

How, then, can you critique positions with which you disagree and still win adherents? We suggest you first try to appeal to people in their roles as reasonable people trying to do the right thing. This dictates a "problem-solving tone" of respect and engagement:

- Investing in education requires long-term planning, not short-term fixes. You wouldn't plan for your own child's college education the way the Administration is proposing to finance education reform. We need to send our elected representatives back to do their homework.
- The truth is that this plan for early education offers too little, too late. This plan is not going to get our children what they need to succeed.

Criticize the plan, not the people. Demonstrate its inadequacy. Question a proposal's competence, its efficacy, its limited perspective and/or its values. But don't question motive, unless you have very, very good reason to do so. Go for the incompetence of the proposal, not its intent. Don't demonize. Demonstrate inconsistency and illogic, not hypocrisy. Don't fall into the trap of implying a vast conspiracy. Show how the proposal violates fundamental values that people already hold.

Your chances of framing tone effectively are greatly enhanced if you first use a Level One value, thereby establishing the criterion against which any subsequent argument should be measured. And if your Level One value is embedded in other frame elements (messengers, visuals, metaphors), you stand a good chance of making the cognitive connection with at least one of these elements.

CHILDREN'S-ISSUES EXAMPLE

- We are responsible for the world we leave our children. Is this new plan really responsible to them? I think every parent should question that. The legislature has not addressed such critical areas as….
- Parents want their children to have an opportunity to do better than they did. This proposal does little to make that possible. By refusing to address…it closes off opportunities for kids.

These are strong statements. But they do not signal to the listener that partisanship or ideology is the motivations.

WELFARE EXAMPLE

I recently received a news release from an organization that wished to raise public awareness about proposed limits on training within the Administration's welfare proposal – an issue with which I am relatively unfamiliar. This news release purports to convey local private-sector companies' disapproval of the Bush plan. Good choice of messenger to question whether the proposals will be effective in helping people leave public assistance. So far so good.

As an efficient thinker, I am searching this communication for cues about its meaning, so I can move on to my next email. Here are the first few quotes:

- "Everybody we talk to outside Washington tells us this welfare plan makes no sense." Translation: Our side doesn't like it. Question: Who is their side?

III. Thinking Strategically About Framing

Elements of the Frame Continued

- "President Bush is giving repeated speeches about the importance of education and training to help people on welfare get the skills they need to succeed. But get beyond the speeches, and you find that the substance of this welfare proposal drastically reduces the number of low-income parents who could enroll in school." Translation: Bush doesn't mean what he says; it's all posturing. Connection: They are anti-Bush. Question: Am I anti-Bush? End of cognitive engagement.

This news release couldn't resisted the temptation to play partisan politics. If it had done so, it might have secured more interest from the reader in learning whether the Administration's proposals on training are any good or not. Is it just remotely possible that one might a) be supportive of President Bush, and b) think his proposals on TANIF are ill conceived? Given the President's high approval rating, these advocates need to win over a good portion of that constituency to their way of thinking. Isn't that one of the reasons they used business spokespersons in the first place?

In fact, many of the quotes in the news release try to move in this more reasonable direction. The statement "The President's proposal puts the states in an impossible situation" predicts effects without questioning motivation. That's a good strategy.

But there's also a game of "gotcha" going on here – and that's problematic. The communication implies that Bush says he's for local control, but he really wants to take over, in that he says he is for flexibility, but he really wants to dictate down and control. Again, the direction of the frame is toward motivation.

Proving the plan is ineffective, inconsistent or ill-considered is different than showing the President (or other public official) is disingenuous and inconsistent. It would have taken little editing to move this news release in that direction – avoiding the partisan cues that now bedevil it.

Of course there are times when righteous indignation is both necessary and desirable. Lori Dorfman of the Berkeley Media Studies Group points out that attacking motivation was an important part of tobacco-control advocates' strategy in addressing the industry. On this issue, by demonstrating that the tobacco industry's motive was profit, not the public's health, advocates were able to show that the industry's behavior profited at the expense of the public interest.

HOW TO USE TONE EFFECTIVELY

- Check your communications to make sure you are not inadvertently communicating partisan or political cues to the public.
- Establish a reasonable tone, and set up problem-solving and "American can-do" to engage your audience.
- Use a strong Level One value to provide a universal, not a narrow partisan cue, as the standard by which the issue should be evaluated.
- Use tone to reinforce other frame elements, not to undermine them. For example, if you are calling for more nurturant public policies, don't sound harsh or extreme.

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IV. A Framing Checklist

Use this checklist as an outline for developing soundbites, brochures or news release for framing errors and omissions. Use it as an evaluation tool to check your communications materials against the research and make sure you have stayed on message and used all the strategies that make sense for each kind of communiqué.

- ☐ Based solely on the material you have provided, are you confident that an ordinary reader/viewer could answer the critical question: What is this about? Is it about prevention, safety, freedom, etc.?
- ☐ In your attempt to frame for the reader "what is this about," did you begin at Level One, by introducing a value like responsibility, stewardship, or fairness?
- ☐ Did you reinforce your Level One message by using words, images, metaphors that support your frames?
- ☐ Did you signal early in your message that solutions exist? Do the solutions "fit" the problem as defined?
- ☐ Did you emphasize efficacy and prevention in the solution? Did you inspire optimism and give evidence that the situation can be improved?
- ☐ Did you establish the cause of the problem, and did you assign responsibility? Reviewing your material, can you tell who created the problem and who should fix it?
- ☐ Does your story have sufficient urgency to place it on the public agenda? Have you asked and answered the question: "What will happen if we do nothing"?
- ☐ Did you effectively put the problem in context, explaining long-term consequences, trends and opportunities to resolve the problem, so that your story is not episodic?
- ☐ Did you stay reasonable in tone, avoiding rhetorical or inflammatory partisan attacks as appropriate?
- ☐ Do your visuals make the same points that your words make? Are they organized to support a coherent story?
- ☐ Did you use numbers sparingly? Did you first tell what they mean? Did you translate them into social math?
- ☐ Did you anticipate and deflect the default frame? Did you avoid arguing with it directly and, instead, substitute a new frame?

IV. A Framing Checklist
Continued

- ☐ Did you use credible and unlikely messengers? Are they likely to be perceived as overly vested in the issue or a sole solution?
- ☐ Is your message strategically oriented to the intended audience, i.e. if addressing business leaders, did you frame your issue as appealing to managerial competence and responsibility?
- ☐ Did you tell people explicitly how they can help, how they can stay engaged, where they can get information, how they should continue to think about these issues, what they should watch for to monitor progress, whom to hold accountable for what actions? And when you did so, did you address them in their role as citizens or merely as consumers?
- ☐ Did you use all elements of the frame to set up your reframe? Context, values, visuals, models and metaphors, numbers/social math, tone?

V. Some Important Definitions

Communications: The FrameWorks Institute views communications as both a theory and a practice that plays a role in shaping public thinking and public life. Communications – earned and paid media, direct mail, brochures, websites, events, grassroots mobilization, face-to-face engagement -- can help or hinder the way people think about social problems and solutions, thus impacting social change.

Public Opinion is the measurement and documentation of how the public perceives and thinks about various issues on the public agenda. Analyzing public opinion can contribute to our understanding of how social learning is shaped.

Framing refers to the way a story is told – its selective use of particular symbols, metaphors, and messengers, for example – and to the way these cues, in turn, trigger the shared and durable cultural models that people use to make sense of their world. "Frames are *organizing principles* that are socially *shared* and *persistent* over time that work symbolically to meaningfully *structure* the world (emphasis in the original)" (Reese).

Reframing seeks to identify alternative frames of interpretation that, although weaker and less common to media, can nevertheless serve the labeling function and foreground different policies or actions. Essentially, reframing changes the lens through which a person can think about the issue, so that different interpretations and outcomes become visible to them.

Media Effects experiments use simulated newscasts to isolate and identify the actual impact on specific policies of exposure to one manipulated news story in an otherwise standard evening newscast.

Public Will refers to the outcome achieved, whether positive or negative, when issue advocates have motivated the public toward action on a social issue or policy.

Cognitive Cultural Models are deeply held understandings that motivate thought and behavior in largely unconscious and automatic ways. They are a kind of prototypical framing that includes several elements packaged together, and that are culture-specific – for example, what it means to be a neighbor, a leader, a parent, etc. The basic elements of a cognitive cultural model include "participants" (people, objects, activities that are associated with that concept or model), a "scenario" (a series of expected, standard events that show the relationships between the participants and are expected to occur in a particular sequence), "presuppositions" (assumptions), "entailments" (conclusions), and "evaluations" (assessments as to whether the model itself, as a whole, is a good thing or a bad thing).

Episodic Frames are the predominant frame on TV newscasts and depict public issues in terms of discrete events that involve individuals located at specific places and at specific times.

V. Some Important Definitions
Continued

Thematic Frames place public issues in a broader context by focusing on general conditions or outcomes (e.g., reports on poverty trends in the U.S.).

Agenda Setting is the process of placing issues on the policy agenda for public consideration and intervention. Media is instrumental to the perceived salience of a particular social problem. As such, the media sets the public agenda, which in turn sets the policymaker agenda (Iyengar).

Priming is the process of consciously triggering a cognitive cultural model and then applying its reasoning to other issues. Priming can also mean "the ability of news programs to affect the criteria by which political leaders are judged…The more prominence an issue has in the national information stream, the greater its weight in political judgments" (Iyengar and Simon, 1994).

Issue is "a social problem that has received mass media coverage" (Dearing and Rogers, 3). Issues are set on the public agenda through the "competition among issue proponents to gain the attention of media professionals, the public and policy elites."

Parachute Journalism is the media's tendency to move rapidly from crisis to crisis, resulting in episodic reporting on many issues.

Persuasion refers to the ability to recognize and manipulate attitudes, defined as "a positive or negative feeling toward some individual or object that serves as a predisposition to action" (Rogers, 1994, 366). Persuasion has its origins in supporting private, consumer-oriented responses to individual choices, but has also been adapted to public problems, in the form of social marketing.

Media Advocacy is an approach that argues the utilization of the media as an advocacy tool. It conceives of media as a product of issues advocates, and the arena for the contestation of power in American society. This requires issues advocates to be active consumers and developers of media content. This approach is most closely associated with public-health issues.

Social Marketing is the practice of applying commercial-marketing techniques to advance social causes. Critical to the definition of social marketing is the notion of influencing individual behavior for the good of that person or general society (Andreason, 1995).

Strategic Frame Analysis is a multi-disciplinary, multi-method approach to communications research and practice that pays attention to the public's deeply held worldviews and widely held assumptions. SFA simultaneously incorporates the basic principles of systems thinking to contextual individual-level choices. This approach acknowledges the power of the media and the role of both elite opinion and grassroots activism, while also incorporating thinking and practice on the nature of mass publics.

V. Some Important Definitions
Continued

Grassroots Mobilization seeks, in the context of communications, to use the media to influence the allocation of public resources in a more equitable manner by empowering community members with a better grasp of how and why media influences outcomes germane to their organizations and communities. The premise is that community groups can have a democratizing influence on the development of solutions to social problems if the media does not marginalize groups.

COMMUNICATIONS TRAPS TO AVOID

DON'T THINK ABOUT ELEPHANTS

Many people believe that the very structure of a conversation must be organized to "start where your audience starts." Research from the cognitive sciences suggests that this tactic is a trap, and is likely to result in your reinforcing old frames, not helping your audience appreciate new ones. What follows is a simple outline of the interaction between speaker and audience, using a traditional pattern of discourse. It is followed by a critique and a suggested reframing.

SPEAKER SAYS: Today I'm going to talk to you about the animals of Africa.

AUDIENCE THINKS: Animals of Africa? What do I know about animals of Africa? Not much. Any cues here for how to think about this?

SPEAKER SAYS: But I don't want you to think only of elephants.

AUDIENCE THINKS: Oh, yeah. They have elephants in Africa. Lots of elephants. I can now see elephants in Africa in my mind.

SPEAKER SAYS: Because it's really not about elephants. They are far less numerous than other species.

AUDIENCE THINKS: OK, there are lots of elephants. But also lots of something else.

SPEAKER SAYS: The animals that dominate Africa are really giraffes, not elephants.

AUDIENCE THINKS: Giraffes, huh? Yeah, I know what a giraffe looks like. Smaller than an elephant. I've had several minutes to think about elephants. And I've now got three elephants in my head *(count them above),* and only one giraffe. It's elephants I see when I close my eyes, not giraffes.

MORAL OF THE STORY: *When you give people immediate cues to help them conceptualize and categorize, you are then working uphill to displace that frame. That is especially true when you first reinforce what they already believe or are familiar with, then attempt to contest it.*

WHAT THE SPEAKER SHOULD HAVE SAID: I want to talk to you about the animals of Africa, especially the giraffe, the most populous species on the continent. Giraffes abound in all parts of Africa, stretching their giant necks from South Africa to Chad, and from Guinea to Somalia. There are more giraffes per person in Africa than there are cars in California. And while other animals also abound – elephants, lions, tigers, zebras – there are four giraffes for all of these animals combined. Giraffes rule.

MORAL OF THIS STORY: You have first conjured the image of the giraffe and made it highly visual before bringing in other animals. You have given people cues about "how many" giraffes there are and have given them two "social math" comparisons to bring it home. While you have acknowledged other animals, as you first set out to do in the original example, you have contextualized these animals so that we can dismiss them. And you have summed up your introduction with a clear statement that this is about giraffes.

VI. FRAMING TECHNIQUES
Continued

FALLING INTO THE ELEPHANT TRAP IN FRAMING SOCIAL ISSUES:
It's important to recognize standard advocacy practices or habits of speech that fall into the "elephants" category. Here are five examples FrameWorks sees in many advocacy communications. In each case, we explain what's wrong and reframe.

EXAMPLE #1:

"Nuclear power plants do not emit greenhouse gases, which might make people think they would be a good solution to global warming. In truth, they produce hazardous wastes that are every bit as unfriendly to the environment."

OR "Clean coal isn't really clean; in fact, so-called clean coal plants have yet to prove effective."

What's Wrong With This Framing?: You have first stated the very position you wish to displant, then you proceed to attempt to discount it. Why give equal time to your opposition? And why give them first placement? Remember: once the audience has identified the story you are telling them (nuclear plants do not emit greenhouse gases, coal is clean), they stop processing information.

Reframe: Nuclear power is a threat to the environment – it's unhealthy and it's unsafe. Environmental problems like global warming require more responsible solutions that clean up our mess, not make more of it.

Coal is dirty. Coal-burning plants are the single biggest source of industrial air pollution. It's time we moved on to a new generation of energy sources that are clean, safe and renewable.

EXAMPLE #2:
"Usually, people think of violence as fate. It just happens, and you can't do anything about it, so go lock your doors and stay away," Rosenberg said. "Here, they're saying there are patterns in common in various types of violence all around the world, and that we have the goods to prevent it all around the world."
Mark Rosenberg, CDC, "WHO Report Details Global Violence,"
The Washington Post, October 3, 2002, A16

What's Wrong With This Framing?: The speaker reminded people of the frame they believe to be true, reinforcing their dominant frame. While he thought he was using it as a "straw man," only to reveal that "it's not what you think it is," that's not the effect. Once you've reminded people of the story they already believe, no subsequent facts or substitute frames are likely to dislodge it. Being fast and frugal cognators, we appreciate that the speaker has reminded us of what we thought all along so we can process this thought and go back to our laundry. End of conversation.

Reframe: Violence shares common characteristics all over the globe. Just as we have good qualities in common with people everywhere, we also have problems in common. Fortunately, we can also share the knowledge to prevent violence from erupting.

EXAMPLE #3:
Even though our state ranks 49th in the country, we still have some wonderful progress to share with you on several key indicators of child well-being.

What's Wrong With This Framing?: When you lead with a vivid image like ranking low on a ruler, the emotion evoked is likely to be a sense of hopelessness. You have conveyed "Big Problems" to the listener, and then you come in with "Small Progress."

Reframe: We are making some significant progress on a number of children's issues in this state. And that progress should inspire us to tackle other problems, and to bring solutions to scale in every community. We need to think of our state as the Little Engine that Could, and apply some determination to the problems our children face.

EXAMPLE #4:
You are all familiar with the pictures we see on the evening news of teenage superpredators, kids bringing guns to school, etc. But what you won't see is the fact that youth crime is actually down nationwide and in our state. Your teenager is much safer in school than driving home from school. Teens are much more likely to be the victims of highway accidents than they are to be victims of school shootings.

What's Wrong With This Framing?: In order to get the listener's attention, this communication resorts to sensationalism or familiarity. The essential positioning is: I'm going to talk to you about something you see all the time, instead of something arcane. But by playing on the popular notion of teen perpetrators, it has conjured a very powerful model, an "elephant" that won't be easy to dismiss. After setting up the boogeyman, this communication then tries to reassure us. But in doing so, it tells us that our child is at risk for a different problem than the one we thought. Far from being reassuring, this just promotes the notion that all children are at risk for everything and likely produces a response of over-protection. Finally, by ending on the note of "school shootings," this communication trumps its own intended reframe by leaving the listener with exactly the image it set out to refute.

Reframe: As parents, our job is to figure out what obstacles and dangers our children are likely to encounter and to help prevent them. We need to pay more attention to highway safety, as it is here that teens are most likely to be at risk and it is here that we can make the biggest difference in personal actions and public policies to prevent harm.

EXAMPLE #5:
Power plants not only cause global warming, but also smog, acid rain and mercury poisoning.

What's Wrong With This Framing?: This is a kind of perversion of the Elephants rule. You imply that the elephant is not enough; chipmunks, monkeys and birds will also be threatened. The way the problem is stated implies that it's not enough that it causes global warming. The "add-ons" undermine the legitimacy of the problem, and trivialize the core issue of global warming. Instead of adding on, integrate single issues under

the category of "environmental problems." This phrasing elevates all the issues, and gives them equal standing as examples of the larger point.

Reframe: Power plants contribute to many environmental problems including global warming, smog, acid rain and mercury poisoning.

EXAMPLE #6:
I want to talk to you today about child poverty. And how it affects the lives of children in urban and rural areas, in working and welfare families, in single and two-parent families, and in many settings across America. There is no one face of a child in poverty.

What's Wrong With This Framing?: When you begin a communication by telling the listener what "this is about," you had better be very careful that the frame you deploy is not one that comes complete with many associated pictures, values and ideas. Child poverty in this communication acts as a prime; that is, it is such a powerful frame – so developed in people's minds – that it colors the rest of the communication. Despite what this speaker intended about diversifying the definition of child poverty, the image s/he has conjured up is likely to be inner-city, African-American children. Similarly, if we started a communication by saying, "I want to talk to you about teenagers," FrameWorks research would suggest that we would be likely to prime the subsequent discussion with an image of silly, self-absorbed, lazy, materialistic kids – all part of the "teenager" frame. When you are trying to address an issue that comes with a highly developed frame (welfare, child care, bad parents, etc.), you may be better advised to come at it by avoiding that frame or substituting a frame that opens people up to a different way of thinking about that issue.

Reframe: As Americans, we believe that everyone should get a shot at the American dream – work that pays, owning a home, having enough to eat, raising our children in communities that are safe, getting an education. But many children start the race with a handicap. And that handicap happens early, even before our schools can help get kids on track for achievement. That handicap is poverty, and the research tells us that it is sending too many of our children to school ill-prepared to learn. A hungry child can't learn, and a child whose brain has not been stimulated early has a harder time learning in school. This handicap can be reversed, but we have to recognize how it affects children and how it denies them the chance of success that is so central to American values of opportunity and prosperity.

SO…..before you put out a news release or frame a soundbite or draft a speech, ask yourself if you have any ELEPHANTS lurking in your communications!

BRIDGING

"If they can get you asking the wrong questions, they don't have to worry about the answers."
Thomas Pynchon, Gravity's Rainbow

Bridging, or answering a question by not answering the question, is a way to segue from a reporter's stated question to the information an interviewee wishes to impart to an audience. Implied in that definition is the fact that reporters often ask questions that advocates do not necessarily wish to "honor" with an answer. The bridge is the way the advocate gets from one side of an argument to another – to the points the advocate wishes to emphasize. Here is a classic example of bridging:

EXAMPLE:
Reporter: "Isn't it true that safety is the first thing a mom looks for in a daycare setting?"

Spokesperson: "While safety is important, it needs to be balanced with other considerations, like the quality of the environment and the qualifications of the staff. Let me tell you what happens in the mind of a child at the age of 3…."

According to standard public-relations practice, this is an effective bridge. The spokesperson took the reporter from a naive question to an informed response. But, drawing on what we now know about how people process information, this bridging technique is NOT effective.

The problem with bridging, as it is often practiced, is that it accepts the frame of the question — a safety frame, in this example — and often repeats it, before reframing.

What does this mean? The question itself prompts a certain idea or cluster of connections in the mind of the viewer/listener. If the spokesperson repeats the frame as part of the bridging technique, their score is 0 for 2 before they've even started. If you've just told the viewers/listeners twice that "this is about safety," it's an uphill battle to get them to realize that "it's not really about safety at all, it's about education." Far from contradicting or dismissing the reporter's frame, we've accepted it and confirmed it, adding to the audience's initial orientation to the subject. An efficient thinker will simply use those cues to erect the frame of interpretation that corresponds, and dismiss most of what comes afterward. There are ways around this problem.

VI. FRAMING TECHNIQUES
Continued

Going back to our original example of the daycare question, the enlighted bridger should have answered:

BETTER EXAMPLE:
"There are several considerations for parents seeking early childhood education...."

The answer does not repeat the negative frame, seems responsive to the question, and allows the spokesperson to go in the intended direction. Here are some simple techniques for effective bridging.

RULE #1: NEVER REPEAT A NEGATIVE FRAME.

Too often the reporter tosses you a question that repeats a stereotype, or is sensationalist or uninformed. Use an innocuous phrase or throw-away line to bridge away from the negative frame...."That's a great question (pause). You've hit an important point. Here's what I think about early childhood education..."

As reporters told FrameWorks representatives, "Don't expect us to do your reframing for you. It's daycare as far as we're concerned. If you want to call it something else, it will have to come out of the mouths of advocates."

Alternatively, restate the question to set up a different frame. "The question you raise is really about how we do a better job in supporting very young children and their working parents. And the answer is that we have to..."

Another way to steer the interview with a bridge is to dismiss the old frame and immediately substitute a new one. That way you signal to the reporter that you are offering something new, a fresh angle on an old story, something that will win approval from their editors or producers.

EXAMPLE
Reporter: "How many children in this state are at risk for poor daycare?"

Spokesperson: "Safety has gotten a lot of attention, but the biggest threat to our children hasn't received the attention it deserves. (PAUSE) The big story about early childhood development is that our schools haven't caught up with our science. We now know that there's a lot of learning going on very early in children. Not just information, but prosocial and antisocial behavior, interpersonal and moral development, and a sense of responsibility for oneself and others. The early foundations for all these important aspects of child development happen earlier than we even suspected a decade ago. Most parents and policymakers don't yet understand that everything starts in those early years."

VI. FRAMING TECHNIQUES
Continued

RULE #2: KNOW HOW YOUR INTERVIEW WILL BE USED.

Always know the rules of the game you are playing. Is this a live or taped interview? Is there ample time to edit, or is the interview scheduled for tonight's evening news? If it's taped and you will be edited, you can reasonably assume that, if you give a great sound-bite, the anchor will re-rerecord or edit around you. So, PAUSE between your bridge and your declarative statement, so they can salvage the latter without catching several syllables.

EXAMPLE:

The way it happened (live):

Reporter: "What's all the fuss about zero to three-year-old kids? You and I played with dirt and spoons, and we grew up OK. Isn't this just a big over-reaction by yuppie parents who are hurrying their children into overachievement?"

Spokesperson: "It's interesting you ask that.....I believe we've always needed better early childhood education. But now we need it more than ever. Our economy has changed. It absolutely requires better-educated workers. And because our economy makes it harder for one parent to stay at home with a child, we need to make sure that a child's intellectual, emotional and moral learning all begin early on if we are to prepare them for the future."

The way it was produced (canned):

Evening News: "Sally Janes, the head of Kids Count, Turtle Island, says the economy is driving parents and our society toward better daycare."

Spokesperson: "I believe we've always needed better early childhood education. But now we need it more than ever. Our economy has changed. It absolutely requires better-educated workers. And, because our economy makes it harder for one parent to stay at home with a child, we need to make sure that a child's intellectual, emotional and moral learning all begin early on if we are to prepare them for the future."

Note that, had the spokesperson not rambled that last sentence out conditional clause first, s/he would likely have had the more societal part of the message cut. It might have ended up: "Our economy makes it harder for one parent to stay at home with a child." End of quote. So sometimes you don't want to pause but rather to weave a clause inextricably into your answer.

Thinking carefully about what you want to pack into your soundbite is a very important bit of preparation. But whether you are talking to print or broadcast reporters, some of the rules are the same:

RULE #3: FRAME THE DATA, OR DON'T FIGHT NARRATIVE WITH NUMBERS.

Too often, advocates succumb to what linguist Deborah Tannen calls "the argument culture" — they try to fight fire with fire. So when a reporter asserts a perspective, the spokesperson resorts to "disproving" it with data. A quick rule of thumb in framing: The narrative is more powerful than the numbers, the meaning more memorable than the mean.

In focus groups conducted over two years on children's issues in which statistics about various social problems were presented to participants, we have only rarely heard an issue discussed by real people with reference to the numbers.

The fact is that many Americans find it hard to digest data and interpret it; mathematical literacy is a major hurdle. But, that aside, the psyche is often resistant to data that erode a comfortable view of the world. Quite often, the numbers are reinterpreted to substantiate an entirely different conclusion. From the social-science roots of framing research we learn this maxim: If the facts don't fit the frame, the facts get rejected not the frame.

Yet, the facts are what produced the media opportunity in the first place. The release of new data is a reliable news hook. So the job of the good spokesperson is to bridge from the trend to the interpretation. Don't rebut, trump!

Even mathematicians recognize this. John Allen Paulos writes, "People...consider numbers as coming from a different realm than narratives and not as distillations, complements or summaries of them" (*Once Upon A Number*, Basic Books, 1998). You haven't done your job until you tell what the number means.

"The process of converting data into easily understandable information that communicates its relevance to an issue has been termed 'social math'," writes the Advocacy Institute (*Blowing Away the Smoke: A Series of Advanced Media Advocacy Advisories for Tobacco Control Advocates,* 1998). As it relates to bridging, the trick is to have an interpretation, a "story" ready to translate the number thrown at you into a more powerful meaning. This does not mean you should drop all numbers, but rather that you should use them sparingly and always link them to meaning.

EXAMPLE:

Reporter: "Isn't it true that much adult violence could be prevented with better early child education? Is early education our best crime prevention?

Here we offer an answer from conservative pollster Dave Sackett, who effectively rebuts this framing first by questioning it, then by negating it, and finally by substituting his own frame:

Spokesperson: "How the hell does nursery school prevent some kids sticking up my liquor store with a gun? Crime prevention isn't nursery school. It's having a bigger gun than the guy who's coming to stick it to me. That's crime prevention."

VI. FRAMING TECHNIQUES
Continued

VI. FRAMING TECHNIQUES
Continued

RULE #4: USE METAPHORS TO BRIDGE.

As cognitive linguist George Lakoff has demonstrated in his research (see *Moral Politics,* University of Chicago Press, 1996), "People reason metaphorically." That is to say that people make connections between one set of things and another. They use what is familiar (my family, my neighbors) to allow them to understand what is foreign or complex (my nation, other nations). Moreover, these metaphorical patterns are not "merely" colorful expressions; they are embedded in people's conceptual systems and they are largely uniform across a population. They comprise a shared culture. And they direct action; all the parts of the metaphor come with the analogy. For example, if foreign countries are neighbors, they don't want us to meddle; we should only show up when they need us and then leave.

The good news is that we often hold several conflicting views or potential ways of seeing an issue, depending upon the prism or "frame" through which we view it. So, if foreign countries are partners in a world community, then we have common interests and need to collaborate regularly. The challenge for the spokesperson is to bridge from a negative frame to one that sets up the kind of reasoning that favors positive social policies.

Applied to bridging, this means the effective spokesperson always is ready with a powerful metaphor that can redirect reasoning.

EXAMPLE:

Reporter: "Isn't this emphasis on education for two- and three-year olds misplaced? Are we going to put up flash cards in their cribs? How can an infant benefit from Beethoven?"

Spokesperson: "There's an old saying that many parents know, 'As the twig is bent, so grows the tree.' We've always known instinctively that the early years were important – we just didn't know exactly how they helped shape our children's minds. Now we know that the whole foundation for learning is set in those early years. Children learn right from wrong very early, they learn the social relationships that will determine how they get along as citizens and as workers. The moral and social foundations of the child are the moral and social foundations of the society as a whole."

Notice how the spokesperson did not waste time addressing the red herrings directly. S/he offered substitute metaphors that redirected attention to familiar, positive images: a cultivation metaphor, a brain-science frame, a cornerstone of society model, and an "investment in the future" message.

VI. FRAMING TECHNIQUES
Continued

RULE #5: CONTEXTUALIZE

If they give you a portrait, bridge to a landscape. If they give you an episode, bridge to the theme of the whole series.

Framing research shows that a human-interest story alone, especially the more vivid and detailed it is, will not lead people to conclude that a policy solution is required for an entire population. More than likely, the case study or example will be interpreted as tragic or regrettable and worthy of pity or charity but without extension; and often, the case is simply an exception, or the exception that proves the rule (the good parent who finds safe, affordable daycare and thereby demonstrates that more parents could do so if they tried harder). So the effective bridger connects the isolated case to trend data, to social situations that caused the problem, and to the policy solutions that are required.

EXAMPLE:

Reporter: "Last week this station ran a horrific story about a toddler trapped in a closet for more than three hours while no one at this daycare center noticed. How can parents tell if a daycare center is safe for their child?"

Spokesperson: "Until we fix the early education system by making sure that all environments for children are stimulating, well supervised, with skilled trained professionals, there will be a lot more horror stories. And a lot more stories that never get told of children who are not challenged, and who are not learning to learn. Both are tragedies, and wasteful of our most precious resources, our future. A good daycare center is one where the teachers have been well trained in early child development, where the ratio of educators to children is no more than X to Y, where the environment is both safe and nurturing, where moms and dads are welcome, and families can afford to bring their children."

RULE # 6: ALWAYS KNOW WHO ELSE HAS BEEN INTERVIEWED OR IS LIKELY TO BE INTERVIEWED

Often reporters will have talked to or will talk to someone who expresses another frame or views that are antithetical to your position. Consider this when creating your messages.

EXAMPLE:

Reporter: "Last week this station ran a horrific story about a toddler trapped in a closet for more than three hours while no one at this daycare center noticed. How can parents tell if a daycare center is safe for their child?"

Spokesperson: "Until we fix the early education system by making sure that all environments for children are stimulating, well-supervised, with skilled trained professionals, there will be a lot more horror stories. And a lot more stories that never get told of children who are not challenged, and who are not learning to learn. Both are tragedies, and wasteful of our most precious resources, our future. A good daycare center is one where the teachers have been well trained in early child development, where the ratio of educators to children is no more than X to Y, where the environment is both safe and nurturing, where moms and dads are welcome, and families can afford to bring their children."

Reporter's Follow-Up: The for-profit daycare association president, Martha Vincent says that it is up to each parent to check out a daycare.

Vincent: Remember that you get what you pay for. Each parent should try to find the best center and stay on top of the way the place is managed. That daycare center was just one that was poorly run. Most of our centers are up to standards required by the state.

A better response that anticipated this hostility toward greater regulations might have been:

Spokesperson: "This is not a story of one daycare center but a story about how we all need to ask the state for better day care centers for our most precious resources. Until we fix the early education system by making sure that all environments for children are stimulating and well-supervised, with skilled, trained professionals, there will be a lot more horror stories.

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Updated: June 2004

The Whole Child – Parents and Policy

A Meta-Analysis of Opinion Data Concerning School Readiness, Early Childhood and Related Issues

Prepared for the Frameworks Institute
By
Meg Bostrom
Public Knowledge, LLC

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Method

The following meta-analysis of opinion research is based on a review of existing, publicly available data. The objective of this phase of research is to develop a strategic perspective of public beliefs that may influence policy support, with the ultimate goal of developing effective communications. This report is not intended to provide a catalogue of all public opinion research on this topic nor is it a review of policy evaluation efforts.

Since this topic touches on many other issues, data gathering required a broad search, including issues such as: child development, child care, early education, education, after school programs, poverty, welfare, juvenile crime, parenting, work, family values, and societal values, among others. Since survey results can be skewed by the context of the survey (meaning a survey about balancing work and family will result in different assumptions about child care policy than a survey about welfare and poverty), the analysis relied almost completely on research for which the entire survey was available. More than 100 complete surveys were reviewed (totaling thousands of public opinion questions). All surveys were conducted within the past five years, except for those instances in which a specific trend in response could help to illustrate a point.

This report is not intended to represent a catalogue of all available data, so not all of the reviewed surveys were included. Rather, this analysis is designed to offer strategic insights that will prove useful to later stages of the research process, so only the most relevant and useful findings have been incorporated.

Introduction

Children exist within the protective circle of the family. This strongly held perception among the public influences the way people view every problem facing children. No matter the issue -- education, poverty, crime, values – the public looks first to parents. This emphasis on parental responsibility is a barrier to broader public policy responses to children's needs. The public looks first to individual solutions to problems facing children – "fixing" parents rather than fixing a systemic problem, and this belief acquires the force of a "default" frame, meaning a belief that, in the absence of other information, will "fill in" to define the situation.

Assumption of parental responsibility is particularly strong when it comes to the youngest children. To bring early childhood into the realm of societal responsibility, advocates have attached early childhood issues to a variety of issue frames that highlight public concern over private concern – education, welfare, crime prevention, work, to name a few. Ironically, within each of these issue frames, early childhood policies have to compete for attention with other reforms. For example, while people prioritize education and see it as a public responsibility, when they consider all the reforms that schools need, early education is frequently at the bottom of the list. Other school readiness issues such as health and economic security are virtually invisible to the public as solutions.

Importantly, none of the most widely used issue frames advances a holistic perspective of what children need. While Americans understand some key elements of child development, they do not demonstrate a cohesive philosophy of child development sufficient to fill in for those aspects they don't understand completely and consistently. For example, the public understands the influence of environment and relationships on children, even very young children. However, people also have developmentally inappropriate expectations for children. Compared to the advice of child development scholars, public views on spoiling and punishing children demonstrate a pervasive misunderstanding of child development that undoubtedly influences the public's perspective on policies.

People want to be good parents, and they use their definition of good parenting in assessing the worth of specific policies. For example, they see day care as an option of last resort, used only because parents <u>have</u> to work and have no other options for watching the child. From this perspective, good parents are those who stay home with their children, and good policies are those that provide tax cuts for at-home parents and paid parental leave. This world view does little to advance quality day care or other early childhood policies unrelated to the primary goal of keeping parents home with children because it does not advance a full developmental perspective, nor does it acknowledge the network of relationships that affect the healthy development of a child.

The task, then, becomes developing a message framework that attaches a developmental perspective, a whole child perspective, to the definition of being a good parent and a good citizen and, at the same time, widens the circle of responsibility to include the

community. In this way, a range of policies can be integrated into a single organic framework, inoculating against the distraction of competing policies that “trump” the early child emphasis.

The following analysis of public opinion data reports on the public’s views toward parenting and child development in order to provide a context for understanding public support and opposition to proposed child policy interventions and remedies. In addition, this report analyzes public opinion in response to four common issue frames for early childhood. The intent of this analysis is to provide a context for understanding public opinion on this issue, and to inform later communications research, not to arrive at a specific message recommendation at this phase of the research.

Issue Context

No issue exists in a vacuum; the public brings its personal experiences to bear on its consideration of public policy. In this instance, views toward parenting, knowledge of how children grow and develop, and assessments of problems facing the country, all influence the public's response to policies for the nation's youngest children. This section includes an analysis of: the public's current issue priorities; prevailing philosophies about how children develop and what children need; and public views toward parenting and the pressures facing parents, including balancing work and family. By understanding these fundamental beliefs about children and families, advocates can be more effective in understanding the existing climate into which public policies are introduced.

Priorities

Security and the economy currently top the national agenda. However, education was the country's top priority up until a year ago, and remains in the top tier of national concerns.

On the eve of George Bush's inauguration, the public was clear about its expectations. Americans wanted the Bush Administration and Congress to prioritize education. One year later, the country has a new issue of concern – the war on terrorism – which is currently taking center stage. The faltering economy has also eclipsed education as a priority for the nation.

Priorities for Congress and Bush Administration
(% Highest Priority)

	2002[1]	2001[2]
Handling the US campaign against terrorism	46%	--
Improving the Economy/Keeping America prosperous	45%	43%
Improving education	38%	50%
Protecting the Social Security system	33%	46%
Improving the healthcare system	32%	43%
Handling national defense/Providing military security for the country	31%	39%
Helping senior citizens pay for prescription drugs	27%	42%
Keeping the federal budget balanced	21%	40%
Protecting/improving the quality of the environment	17%	30%
Reforming/Improving the way political campaigns are financed	14%	25%

While most current polls continue to show terrorism and the economy at the top of the national agenda, education remains a top concern and one the public wants addressed. Three-quarters (73%) say education should be a top (38%) or high priority (35%) for federal funds,[3] and 80% say their state should make education a top (42%) or high priority (38%) for state funds.[4] Most (60%) report that their states have budget deficits (27% say their state has a serious deficit); even so, they want education budgets protected. A majority (53%) designates education as the last area to be cut. This ranks education higher than all other issues, including healthcare (18%), law enforcement (8%), welfare (6%), Social Security (6%) and services for seniors (4%).[5]

The public is even willing to have the federal government run a deficit for three priorities: to "increase spending for the war on terrorism and our nation's military and defense" (78% would support a deficit to fund this priority); to "increase spending on education for students from kindergarten through college" (67%); and to "increase spending on steps to stimulate the economy" (62%). Far fewer would support deficit spending to "increase spending on prescription drugs" (46%) or to "make permanent the federal tax cuts implemented last year" (39%).[6]

Perspectives on Child Development

Some public opinion queries attempt to measure the public's knowledge about the process of child development. For the purposes of this review, following the perspective of strategic frame analysis, the specific *factual* knowledge adults cite is less important than the philosophy of child development expressed by the patterns of response to these kinds of questions. This section reviews findings from a unique and comprehensive public opinion survey of development knowledge entitled, "What Grown Ups Understand About Child Development,"[7] which provides an indication of the perspective adults bring to child development issues.

Adults understand that babies are influenced by their environment and relationships. They report that a child's abilities are not predetermined at birth, and that early experiences influence children later in life. Adults believe brain development can be influenced from birth (or earlier) and that this early influence will have an impact on later school performance. Emotional development, they believe, is also influenced by these early years, with high percentages of survey participants responding that emotional closeness influences intellectual development, that violence can have long-term effects, and that self-esteem is developed early.

People understand that children are shaped by their relationships and environment. For example, 77% of adults point to the following statement as "false," with 63% saying it is "definitely" false: "Children 's capacity for learning is pretty much set from birth and cannot be greatly increased or decreased by how their parents interact with them."

Furthermore, they believe this influence begins early: 71% of adults say a parent can begin to significantly affect a child's brain development right from birth or even before birth. And the early influence can have long-term effects: 76% of adults choose the statement "Some people say that a child's experiences in the first year of life have a major impact on their performance in school many years later" over the competing statement "Others say babies 12 months and younger are too young for their experiences to really help or hurt their ability to learn in school later in life."

Much of the early influence on development that the public can identify is grounded in emotions and relationships. Eight out of ten believe "Parents' emotional closeness with their baby can strongly influence that child's intellectual development." A majority of adults (58%) and 72% of parents of children age 6 and younger say that an infant can

recognize his mother's voice within the first week after birth, and two-thirds of adults (66%, 78% of parents of children age 6 and younger) believe that children begin to develop their sense of self-esteem before age two. Finally, three-quarters reject the statement "A child aged six months or younger who witnesses violence, such as seeing his father often hit his mother, will not suffer any long term effects from the experiences, because children that age have no long term memory."

While adults believe children are influenced by their surroundings right from birth, many do not necessarily understand how significantly babies interact with the world around them and how sensitive they are to emotions.

While three quarters (72%) believe a "child begins to really take in and react to the world around them" within the first 6 months of life, only 26% understand that infants react to the world around them right from birth or in the first week of life. Only 40% of adults understand that babies can be affected by their parents' mood in the first 1-2 months of life and only 13% understand that a baby 6 months old or younger can experience depression.

Adults recognize the value of play and the kinds of activities that benefit children such as reading, art and providing a sense of security. While some beneficial activities are undervalued, and other less beneficial activities are more valued than they should be, the broader lesson is that people understand that stimulating activities matter to a child's development. Importantly, too many adults overvalue such "educational" activities as flash cards and educational television.

People understand the value of play in social development (92% of adults rate its importance 8, 9, or 10 on a ten point scale), intellectual development (85%) and in language skills (79%). They also recognize the importance of play for children of different ages. Eighty six percent of adults see play as important for a 5 year old, 80% say it is important for a 3 year old and 60% think it is important for a 10 month old (the interpretation of "play" probably reduced initial ratings of importance of play for infants, since people rate specific activities at higher levels).

Most adults understand the role of play in helping children to become better learners. The example of play that most adults see as effective in helping children become better learners is a four-year-old making art with art supplies (81% of adults rate this 8, 9, or 10 on a 10 point scale) followed by a 12-month-old rolling a ball with parents (77%) and a two-year-old having a pretend tea party with mom (74%). Two-thirds of adults also understand the benefit of a four-year-old collecting and sorting leaves (67%), a six-year-old playing pretend firemen with friends (66%), a six-year-old playing cards with his dad (66%), and a six-month-old exploring and banging on blocks (61%).

Importantly, two of three types of play that child development research suggests are less beneficial are rated highly by adults: a four-year-old memorizing flash cards (68%) and a four-year-old making art on the computer (63%). Only 46% see a two-year-old playing a computer activity as play that helps children become better learners.

Of several activities that child development experts say benefit children, some are universally understood by adults to be effective activities, including: reading with the child (95% all adults rate this activity 8, 9, or 10 on a 10 point scale), talking with the child (92%), providing a sense of security and safety (86%) and providing a healthy diet (84%). Other beneficial actions are rated highly, but are not as universally understood by adults to be effective activities, including: quality day care (69%), climbing on playground equipment while supervised (65%), and playing music the child enjoys during playtime (63%).

Two activities development experts say are not helpful to development are valued by nearly two-thirds of adults: watching educational shows on TV (64%), and educational flashcards (65%). Two activities experts say are not very helpful are also viewed as effective by less than a majority of adults: playing educational games on a computer by himself (45%), and playing Mozart as background music during playtime (36%).

The real gaps in public understanding of child development emerge when people are asked to consider expectations of children at various ages. Though most adults answer these questions correctly, a significant percentage set expectations of children too high and view developmentally appropriate responses as "spoiling." Though a majority recognizes that spanking can lead to physical aggression in children, less that a third say it is never appropriate to spank a child. Inappropriate expectations and views on spoiling and punishment can lead to poor parenting skills as well as undermine worthy policies, programs and activities.

There are many indications in the survey data that large percentages of adults hold developmentally inappropriate expectations for children. For example, most adults (72%) understand that "three years old is too young to expect a child to sit quietly for an hour," though a sizable minority of parents of young children as well as non-parents (26% each) thinks three-year-olds should be able to sit quietly for this length of time. Similarly, two-thirds (67%) of adults say a six-year-old who shoots a classmate could not understand the results of his actions, though a sizable minority (26% of adults and 30% of parents of children 6 years old or younger) believes a six-year-old would understand the consequences of this act. When asked for the motivation of a 12-month-old who turns the TV on and off repeatedly, most appropriately answered that the child could be trying to get her parents' attention (89%) or is trying to learn what happens when buttons are pressed (88%). However, nearly half of adults (46%) incorrectly think that a child might do this because she is angry with her parents and is trying to get back at them. Finally, adults set expectations too high for sharing, with a majority (55%) of adults saying that a 15-month-old should be expected to share her toys with other children.

Views on spoiling demonstrate a pervasive misunderstanding of child development. Nearly two-thirds (62%) believe a six month old can be spoiled. Furthermore, many adults define a variety of developmentally appropriate actions as spoiling, including picking up a three-month-old every time she cries (55%), letting a two-year-old get down

from the dinner table to play before the rest of the family has finished their meal (44%), and letting a six-year-old choose what to wear to school every day (38%).

Finally, a majority of adults (57%) rejects the notion that "Spanking children as a regular form of punishment helps children develop a better sense of self control." Even more (60%) agree that "Children who are spanked as a regular form of punishment are more likely to deal with their own anger by being physically aggressive." Even so, only 32% of adults and 29% of parents of children 6 and younger say it is never appropriate to spank a child. In fact, 73% of adults agree (27% strongly agree) "it is sometimes necessary to discipline a child with a good, hard spanking."[8] Since the mid-1980s the percentage agreeing with this statement has dropped from 83%, but those who strongly agree has stayed the same (27%).[9]

Parenting

Most Americans believe good parenting means raising children to be independent. Of a variety of characteristics, adults say being able to think for themselves is most important in preparing children for life. Boys and girls should be raised in a similar fashion and with the same expectations.

Adults see independence as the ultimate goal in raising children. What children need to be prepared for life, they assert, is "to think for themselves" (63%), rather than "to be obedient" (29%).[10] Even when the choice of characteristics is broadened, adults still prioritize the ability of children to be able to think independently as the most important preparation for life (49% choose it first among a list of five characteristics). The characteristics "work hard" and "help others" are closely rated as second and third in priority (67% chose hard work as second or third; 63% chose helping others). The ability "to obey" receives a mix of ratings, but a plurality (36%) rates it fourth in importance. Finally, three-quarters see being well liked or popular as the least important of the five characteristics in preparing children for life (75%). The negative associations with "popularity" probably skew response to this characteristic. If wording such as "ability to get along with others" or "ability to make friends" had been tested, we suspect it would have rated higher in importance.

Which in this list is most important for a child to learn to prepare him or her for life? Second most important? Etc.[11]

Rank Order	Think for Him/Herself	Work Hard	Help Others	Obey	Well liked/ Popular
1st	**49%**	17%	13%	19%	1%
2nd	18%	**36%**	**30%**	12%	2%
3rd	14%	**31%**	**33%**	17%	3%
4th	13%	12%	20%	**36%**	17%
5th	5%	1%	3%	15%	**75%**
No response	2%	2%	2%	2%	2%

Furthermore, men and women both believe that boys and girls should be raised the same way and with the same expectations. Fully 88% state, "Parents should have the same expectations of both boys and girls when it comes to their education and careers" while only 11% believe "Parents should have different expectations of boys and girls when it comes to their education and careers." Men and women respond similarly on this measure.[12]

Most also believe that boys and girls should be raised the same, though women feel more strongly about this than men. More than two-thirds (69%) side with the statement, "Young boys and girls should be brought up alike, with similar toys and play activities" while only 28% say, "Young boys and girls should be raised differently, with different toys and play activities." Though majorities of men as well as women believe boys and girls should be raised the same, more women feel this way (76%) than men (61%).[13]

Adults treat parenting as an important responsibility, though many did not feel prepared when they first became parents. Most view poor parenting and a lack of values as bigger problems facing children than drugs, education, or other topics in the news.

Parenting tops the list of adults' life priorities. Nearly all adults (95%) point to "being a good parent" as "one of the most important" (41%) or a "very important" priority (54%). Parenting skill is closely followed by "having a successful marriage" (86%, 31% "one of most important"). Success in a "high paying career" is last among the priorities tested.

Personal Priorities in Life[14]

	One of Most Important	Very Important	Summary Importance
Being a good parent	41%	54%	95%
Having a successful marriage	31%	55%	86%
Having a satisfying sexual relationship with a spouse or partner	15%	58%	73%
Having close relationships with your relatives	17%	54%	71%
Having close friends you can talk to about things that are happening in your life	14%	51%	65%
Having an active sex life	14%	44%	58%
Living a very religious life	15%	37%	52%
Having lots of free time to relax or do things you want to do	8%	41%	49%
Being successful in a high paying career or profession	9%	32%	41%

As much as they value being a good parent, few (35%) felt well prepared for parenthood when they had their first child.[15] They turn to their own parents for help. A majority of mothers rely on their own mother for child-rearing advice at least sometimes (61%) with one-quarter (26%) saying they rely on their mother "often." [16]

At the core of problems facing children, the public reports, is poor parenting and an inability to impart values. Parents agree that raising well-behaved children is more difficult than attending to children's physical needs.

When the public considers the problems that children face, they hold parents responsible. Topping the list of a series of problems facing families is "parents not paying enough attention to what's going on in their children's lives" (83% say it is a very serious problem). This is rated higher than peer pressure to use drugs (68%), the influence of sex and violence in the media (67%), divorce (63%), or inadequate schools (56%).[17] Additionally, 45% point to "children learning respect and rules" as a bigger problem than education (39%), health care (29%), crime (29%), drugs (26%) or income (17%).[18]

Parents agree that it is far more difficult to raise children who are well behaved and who have good values than to provide for children's health and physical well-being. Importantly, low-income parents are much more likely to say that providing for their children's health and physical well-being is more difficult (41%) than higher-income parents (14%).[19]

Most think parents today are doing a worse job than their own parents did, and few mothers are very satisfied with their performance as a parent. Still, the public is forgiving. People overwhelmingly believe it is much more difficult to be a parent today than in past generations.

A majority of women (56%) reports that mothers are doing a worse job today, with older women more critical of today's mothers than younger women. Two-thirds (65%) of women age 50-64 say mothers of children under 18 are doing a worse job as parents than their own mothers did, while 54% of women under 50 feel the same way.[20] However, the public overwhelmingly feels that it is harder to be a parent today (78%)[21] and women feel it is more difficult to be a mother today (81%).[22] Older women are more likely to believe is it harder to be a mother today than younger women (86% of women over 50 compared to 71% of women under 30). [23]

Only 35% of mothers of children under 18 are "very satisfied" with the job they are doing as a mother. Whether moms are working or at home, they rate their performance similarly. The biggest distinction is by education level among stay-at-home mothers. Stay-at-home mothers who are college educated are the least satisfied with their own performance (only 28% are very satisfied) while stay-at-home mothers without a college education are the most satisfied (46% very satisfied). [24]

Parenting is a two-person job. While one person can successfully raise children alone, children with two parents active in their lives are better off than those without two parents. But just having two parents is not enough. The ideal situation, according to the public, is a two-parent family in which one parent stays at home or works only part-time.

Most believe that one adult can successfully raise a child alone, even a child of the opposite sex. Fully 80% say women are "capable on their own of successfully raising boys into men" and 68% say men are "capable on their own of successfully raising girls into women."[25]

They do, however, see children of single parents as being at a disadvantage. Two-thirds (66%) report that children who grow up in one-parent families are worse off (19% much worse off) than children in two-parent families. Only 21% think they are just as well off.[26] Two-parent families provide children with advantages. Those children with fathers active in their lives "tend to develop more self-confidence" (90%) and "tend to be better problem-solvers" (80%) than children who lack an active father in their lives.[27]

Not only do people see two-parent families as better than single parent families, they also look to work status as an indicator of a parent's ability to do a good job of parenting. Most women see families with a stay-at-home parent, or a parent that works part-time as better able to do a good job than other families. In fact, families with two full-time working parents receive similar ratings as single parents.

Rating of Ability to Do a Good Job as Parents[28]
(Ratings by Women)

	Most Can	Some Can
Couples in which the father works full-time and the mother stays home	66%	29%
Couples in which the father works full-time and the mother works part-time	54%	38%
Couples in which both the father and mother work full-time	29%	50%
Single mothers	28%	54%
Stepmothers	28%	52%
Divorced couples who split custody so the children live with each parent some of the time	17%	50%

As they look to the future, most (67%) predict more babies will be born out of wedlock rather than fewer (29%).[29] Furthermore, due to the importance of two-parent families, most would like divorce to be harder to obtain than it is now (62%).[30] They rate divorced parents as the least able to do a good job as parents. Even so, they are divided about whether or not an unhappy couple with young children should get divorced (46% think they should, 50% think they should not).[31]

Work and Family

Americans continue to feel conflicted about working mothers. There have been significant changes in the roles between the sexes over the last half-century, and they see no going back. However, they do not see the changes as all bad. They are conflicted about whether it would be better for society or for their own family if roles reverted to the "traditional" roles of the 1950s. Most men and women prefer to work outside the home, but mothers of young children would rather stay home.

Three-quarters (76%) say there has been a great deal or quite a lot of change "in recent years in the relationship between men and women in their roles in families, the workplace and society."[32] Two-thirds see these changes as both good and bad for the country, with more pointing to "good" (18%) than "bad" (13%).[33] They hold mixed views of whether it would be better or worse for the country if men and women returned to a "traditional" role from the 1950s: 38% say it would make things better, 34% worse, and 25% no difference.[34] The public is also ambivalent about whether it would be good or bad for their *own* families to return to a traditional role: 28% say it would make things better, 33% worse, and 37% no difference.[35]

Though people may not necessarily want to return to the 1950s, they do think that changes in gender relationships have made it harder: "for parents to raise children" (80%); "for families to earn enough money to live comfortably" (65%); "for marriages to be successful" (71%); "for women to lead satisfying lives" (47%, with women 6 points more likely than men to say harder); and "for men to lead satisfying lives" (48% with men 9 points more likely than women to say harder).[36]

The public sees a lot of pressure for women to have it all. It is possible, people assert, for women to be successful at both career and home, but it is much more difficult to raise children well in that environment. Most feel dual income families exist because both parents need to work, but also believe society would be better if one parent could stay home with children. Importantly, a sizable minority thinks many families could have one parent at home if they were willing to sacrifice material things.

The public believes "there is too much pressure to have it all – marriage, family, and a successful career" (66% agree, 45% strongly), and women in particular feel strongly about this (71% agree, 49% strongly).[37] Still, the public believes it *is possible* for women to have it all. Nearly three quarters (71%) believe "A woman can have a very successful, high-paying career and also be a very good mother" while 27% think "A woman must decide between having a very successful, high-paying career or being a very good mother."[38] Slightly more (78%) say "A man can have a very successful, high-paying career and also be a very good father" while only 20% think "A man must decide between having a very successful, high-paying career or being a very good father."[39] Men and women respond similarly to a man's career choices, but when it comes to a woman's choices, men are slightly more likely than women to believe a woman must

choose between career and family (30% of men, 25% of women). [40]

While it is *possible* for women to have it all, the public is divided about whether or not a woman should *try* to have it all. Only a slim majority (51%) of both men and women believe "It's fine for a mother with young children to take a job if she feels she can handle both responsibilities," over "A mother who is able to financially should stay at home with young children" (43% of women, 41% of men agree). [41]

A majority (57%) says most dual income families work because they need two incomes to make ends meet. However, a sizable percentage sees other motivations: 22% think most dual income families are motivated by the desire to live in good neighborhoods with better homes and schools; 18% think they just want more money for things they could really do without.[42] People are struggling with values as they consider these issues. They do not want material things to stand in the way of parents raising children themselves (the preferred state). Yet, they recognize that families need to decide what is best for their own situation.

The ideal, according to the public, is for one parent to stay home, work part-time or work from home. Most adults prefer to work outside the home, except for mothers of very young children who would, in large percentages, prefer to stay home. What mothers most want in a job is flexibility in their work schedule.

One at-home parent is the preferred option for families today. More than three-quarters agree (80%, 52% strongly) that "It may be necessary for mothers to be working because the family needs money, but it would be better if she could stay home and just take care of the house and children."[43] A plurality (41%) says that one parent staying home to raise the children is ideal, followed by one parent working part-time (24%) or one parent working from home (17%). The option favored by the fewest is both parents working full-time (13%). Older Americans are most in favor of one parent staying home (56% of seniors support this option, compared to only 31% of those under 30). [44]

There is increasing acceptance of fathers taking more responsibility for home and children. Of those who choose one parent working part-time as the ideal, more than two-thirds (69%) say it doesn't matter which parent is working the full-time position. Of those who say one parent should stay home, a majority (55%) asserts it doesn't matter which parent. Both of these responses have changed over time. In the ten years from 1991 to 2001, the percentage saying it doesn't matter which parent stays home jumped 21 percentage points; the percentage saying it doesn't matter which parent works full-time or part-time grew 14 percentage points.[45]

If they were free to do either, most adults would prefer to work outside the home (62%) rather than stay at home and take care of the house and family (35%). This response is driven by men, who far prefer working outside the home (73%). Women overall are more divided, with a slight majority (53%) preferring working outside the home, and 45% saying they would prefer to stay home.[46] It is those with young children who favor

this option most. Fully 80% of mothers of children under 6 years old would prefer to stay home.[47]

Rather than part-time work or work from home, what mothers most want in a job is flexibility in their work schedule. Three-quarters (73%) choose a flexible work schedule as very important in a job – much higher than part-time work, telecommuting or on-site childcare. [49]

Mothers' Job Priorities[48] (% Very Important)	
Flexible work schedule	73%
Part time hours/job sharing	42%
Telecommuting	42%
On-site child care	41%

Most working parents feel they have sufficient time for their children, and can alter their work situations for their family. However, most also feel guilt when they leave their children for work in the morning, and see day care as an option of last resort.

Most working parents report they have enough time to spend with their kids (67%), but not enough time for themselves (56%).[50] To meet their family needs, most working parents say their employer would allow them to work fewer hours (69%), have flexible hours (67%), and take paid leave (53%).[51] Few (27%) believe it would hurt their career if their employer heard they wanted more time with their kids. [52] However, half (47%) also report that when their childcare falls through, it causes problems at work.[53]

A majority of married parents who work agrees (53%, 29% strongly agree) that they "feel bad about leaving my kids in the morning when I go to work."[54] Men and women respond similarly to this question. The public views day care as a last resort: 71% agree (28% strongly agree) "parents should only rely on a day care center when they have no other option." [55]

The guilt in leaving children and disregard for day care may result, in part, from the public's belief that children do not have as strong a bond with working parents. Two-thirds (67%) believe it is true, and 45% report it is *definitely* true that "Children usually have stronger bonds with parents who do not work and stay home than they do with parents who work full time outside of the home."[56]

Balancing work and family is viewed as the responsibility of parents. When the public is thinking of childcare as a work issue, few see a major role for government or employers.

Parents have primary responsibility for making sure that working families have childcare (60%); far fewer place responsibility on government (22%) or employers (15%).[57] Even more (72%) place responsibility for the costs of childcare squarely on parents, rather than perceive quality childcare as a benefit to society that all taxpayers should share (24%).[58]

When confronted with the fact that "many mothers reduce their hours and responsibilities at work so they can be home when their children are young," two-thirds (67%) respond that "is just how life works – it is a choice that mothers and families make for themselves." Only 29% choose the alternative statement, that "this is a problem – if our

nation had a better child care system, mothers would not have to make this choice."[59] In fact, those mothers who choose to stay home with children are held in more positive regard than mothers who work outside the home. A majority (51%) has more respect for mothers of pre-school children who stay home full-time, while only 20% have more respect for mothers who work full-time outside the home.[60]

When the role for government and employers is defined broadly, parents appreciate the role both can play in addressing parents' concerns, though they do not see either entity doing much now. Parents are divided in their assessment of how much government is doing about parents' concerns – 36% say government is doing a "great deal" or "somewhat" while 50% say government is doing "not very much" or "nothing at all." They rate employers similarly, with 44% saying employers are doing something to address parents' concerns and 48% reporting they are not doing much. However, 81% believe government could do quite a bit (44% "a great deal," 37% "somewhat") and just as many (79%) say employers could do quite a bit (38% "a great deal," 41% "somewhat").[61]

Framing Child Development Issues

Policies for young children have been communicated through a variety of frames. Some position policies for young children as being about day care and work. Others have attached child development policies to education or school readiness. Advocates for welfare reform and poverty have highlighted poor children's needs. Crime prevention has been frequently touted as a reason to pay attention to children, though most use this in the context of older youth. The choice of frame has important consequences for public perceptions of the child development issues. This section analyzes public opinion data related to young children but gathered through an issue lens of work, education, crime or poverty. While it is not possible to complete a thorough and balanced assessment of the impact of each frame by comparing across surveys, this kind of analysis provides insights into the connections people make in response to characterizing the issue within these distinct frames.

Day Care and Work

Much of the framing of childcare has been in the context of work. Knowing that the public dislikes leaving young children in the care of others, one response has been that parents have no choice – they have to work. To advance improvements in the accessibility, affordability and quality of childcare, some advocates have tied the issue to employer responsibility. This section explores public response to programs and policies when people approach children's needs from the perspective of work.

As noted in the previous section about work and family, when the public thinks of childcare as a necessity for working parents, people tend to see day care centers as a negative circumstance -- the course of last resort. They prefer that one parent stay home rather than place children in the care of someone else.

Three-quarters of the public agrees (74%, 39% agree completely) that too many children are being raised in day care centers these days.[62] When thinking in a work frame, the public *and* children's advocates agree that the best arrangement for families is for one parent to stay at home (71% of advocates, 70% of adults). Advocates see a quality day care center as the next best solution (13%), while the public thinks "parents working different shifts" is a better choice (14%).[63]

Parents of young children and children's advocates feel very differently about day care centers. Three quarters of advocates agree (78%, 36% strongly) that "when children go to a top-notch day care center, the care and attention they get is just as good as what they would get from a stay-at-home parent." However, only 35% of parents of young children agree (9% strongly). [64]

Importantly, negative attitudes toward childcare are due to its association with work and leaving children in the care of another. If, however, the frame is early education and

people are thinking of a quality learning environment, they feel very differently. A majority feels "very positive" toward "pre-school" (56%), "early learning" (55%) and other learning-oriented labels. In comparison, only 32% feel "very positive" toward "child care."[65]

Parents who use childcare say that their biggest concern in finding childcare is safety -- finding a trustworthy provider. Majorities are concerned about abuse and neglect, even though they are satisfied with their own childcare arrangements. They feel children get more attention and affection with a stay-at-home parent, but children learn how to get along with others in organized childcare.

Half (47%) of those with children 6 and younger have children in childcare for which they pay.[66] Most say that childcare is not much of a problem (68%) or an occasional struggle (21%). Even low-income parents report that it is not much of a problem (56%) or just an occasional struggle (26%). Only 11% of parents and 18% of low-income parents say that childcare is a continuous problem they struggle with on a regular basis. [67]

The most difficult part of selection, according to those who currently use childcare, is finding a trustworthy provider (57%). Far fewer point to affordability (14%) or convenience (11%) as the most difficult part. [68]

Parents of young children are very satisfied with their current childcare arrangements (83%),[69] and 62% of those with children in a professional day care center say if they could choose their ideal childcare arrangements, they would choose their current arrangement. [70] Even so, parents have a variety of concerns about what could happen in a typical day care center. Parents of young children are most concerned about the possibility of physical or sexual abuse (63% very concerned), followed by neglect (62%), lack of attention (55%) or picking up bad manners or behavior (52%).[71]

In comparing the advantages of staying at home with a parent and attending childcare "with well-trained caring people," the public believes children are more likely to get the affection and attention they need with a stay-at-home parent (81%) rather than in child care (18%). Nearly half believe a child would learn basic values such as honesty and responsibility in either setting (49%), but the remainder put the advantage with a stay-at-home parent. Only in learning life skills such as how to share and get along with others, do people give the advantage to childcare (46%).[72]

As noted in the prior section, the public places primary responsibility for childcare with working parents. However, when asked to consider the role for government and business, the public gives these sectors poor marks for the job they are doing. Employers reject that childcare is an important benefit, though workers say they would use on-site childcare if it were available.

Two-thirds (63%) of adults say the government is doing only a fair or poor job in making changes in the workplace to help workers meet the needs of their very young children."[73]

Nearly as many (59%) rate employers poorly on the job they are doing in changing to meet the needs of workers and their very young children.[74]

Employers disagree (79%, 55% strongly) that they have lost good employees due to a lack of childcare benefits.[75] Large percentages agree (86% agree, 59% strongly) that the responsibilities and liabilities of an on-site childcare center are too much for their company to assume.[76] Meanwhile, 73% of working parents say they would be likely (46% extremely likely) to use high quality childcare if it were offered at their workplace.[77]

Reasoning within the work frame, in which the public sees day care as an unfortunate circumstance and safety as the most important consideration, the desirable public policies are those that help parents stay home and regulate childcare for safety.

Given the choice, the public prefers that policy concerning families and work focus on making it easier and more affordable for one parent to stay at home (62%) rather than improving the cost and quality of childcare (30%).[78] In addressing the weaknesses in the childcare system, parents of young children believe the best direction for government policy is to tighten regulations on the current system (48%) rather than move toward a universal childcare system (27%).[79] Children's advocates disagree. They see the best direction for government policy as moving toward universal childcare (68%) over providing tax breaks to make childcare more affordable (16%) or providing tax breaks to encourage families to have one parent stay at home (6%).[80]

There are several policies that the public believes would be helpful in improving the care that young children receive. However, as the following table demonstrates, the work frame highlights *encouraging stay-at-home parents* as a policy proposal, while *creating universal childcare* is the least supported policy proposal. Reasoning within the work frame, the public would rather help parents stay home than continue to place children in arrangements they view as a last resort. The work frame underscores the needs of parents, but does little to advance the need for quality early education programs.

Policy Support -- % Very Helpful[81]

Giving a much bigger tax break to parents who stay home to care for their children	64%
Requiring employers to give employees six months of paid parental leave	61%
Increasing funding for the Head Start program for low-income families	60%
Tightening state regulations and licensing for childcare and day care centers	54%
Extending the school day with after-school programs to accommodate the schedule of working parents	48%
Giving families a much bigger tax break when they use professional childcare	48%
Spending tax money to create a universal childcare system for all families	40%

Parental leave is one policy that receives strong support under the work frame. One-third of adults (37%) and even more parents of young children (41%) say that a working

mother with a newborn should be able to stay home up to three months after giving birth. A majority of adults and parents (54%) thinks four or more months is ideal.[82] There is wide-ranging support for a paid parental leave policy (80% support, 56% strong support).[83] Support is even higher for a paid parental leave policy supported through an expansion of state disability or unemployment insurance programs (85% support, 55% strong support).[84]

Education and School Readiness

By attaching policies for young children to the education issue, advocates are taking a non-existent public policy issue (young children), and linking it to one of the public's most important priorities. However, it is important to recognize that, once under the education frame, school readiness must compete with all other school reform policies. Since people have little understanding of child development, school readiness policies are frequently rated as lower priorities than other better understood school reforms. Furthermore, a misunderstanding of child development may cause people to misinterpret what is meant by "early childhood education," and cause adults to worry that society is putting too much pressure on three and four-year-olds, forcing them to learn letters and numbers before they are ready.

Americans expect and hope that there will be improvements in education. They prioritize education because they see it as the best way to help youth and to improve our future.

Americans' greatest hope for the future of the nation is that there will be improvements in education (36%), followed by declining crime and drug abuse (34%), better race relations (29%), economic prosperity (26%), a cleaner environment (18%), and more personal freedom (8%).[85] Furthermore, nearly half expects there will be big changes in education over the next 30 years (45%) – more than expects changes in work life (24%) or politics (24%).[86] People are twice as likely to believe the public education system will improve in the next 50 years (66%) than to believe it will get worse (30%).[87]

People give schools significant responsibility for creating a better future. When asked how big a role various institutions will play in making life better in the future, schools and universities are near the top (79% major role) after science and technology (89%) and medical advances (85%). Schools are seen as having a larger role than government, business, the military, the media, or religion.[88]

When it comes to helping kids, two-thirds view improving school quality as the most effective approach, higher than community centers or more flexible work schedules for parents, specifically: improving the quality of the public schools (68% very effective way to help kids); more programs and activities for kids to do after school in places like community centers (60%); employers giving parents more flexible work schedules so they can spend more time with their kids (59%); more involvement by volunteer organizations dedicated to kids, like the Boy Scouts and the YMCA (52%); and a

nighttime curfew after which kids could not be on the street without their parents (51%).[89]

The public has serious reservations about schools. Most give their own schools solid marks, but give failing marks to schools nationally. People worry that American schools are falling behind the rest of the world. The school system requires major change, but they would rather reform the existing system than create a new one.

Americans conclude the United States leads the world in just about every area, but American schools are "average" (37%), "below average" (31%) or "among the worst" (7%) compared to other industrialized countries.[90] People have lost respect and confidence in public schools since the 1970s. In 1973, 58% said they had "a great deal" or "quite a lot" of confidence in public schools. That figure has eroded over time and now stands at 38%.[91]

When thinking of schools nationally, only 23% of adults give schools a grade of "A" or "B." However, ratings of their local public schools are far higher, with 51% grading their local public schools "A" or "B."[92] Ratings of local public schools have been increasing steadily since the early 1980s -- from 31% in 1983 who rated their schools an "A" or "B" to 51% today. Similarly, the percentage of public school parents rating their own local school as "A" or "B" has risen from 42% to 62%. At the same time, ratings of the nation's schools have remained low.

Ratings of the nation's schools are driven by negative perceptions of inner city schools, rather than schools generally. For example, a majority of women rate their community public schools "A" or "B" (57%), but only 38% grade the nation's schools at the same level. Looking at ratings of local schools by city size clarifies that few of those who live in big cities rate their local schools highly (41%). The high response for community schools is the result of the response of those who live in suburbs (57% rate their community schools an "A" or "B"), small towns (66%), and rural areas (69%).[93]

To fix the nation's schools, the public would rather reform the existing public school system (72%) than find an alternative (24%).[94] However, they believe the necessary changes are significant. Nearly two-thirds (63%) say "there are good things, but the public school system in this country requires major changes," rather than "it's basically okay, but does require some minor changes (39%)." However, few (6%) believe "we need to completely replace it."[95]

The goal of schools, according to the public, is to prepare students for life. That means training students in how to think well, and providing practical skills and basic values. These are not the areas that schools prioritize now. The public is divided about whether all students can achieve high academic learning, but absolutely believes that students now achieve only a small part of their potential.

Schools have the wrong priorities. In the public's view, schools are giving priority to "preparing students for college" (38%) and "providing vocational skills that prepare

students for employment" (28%). By contrast, people *want* schools to be "teaching students basic values, such as honesty and respect for others" (37%) and "teaching students how to reason and think well" (36%). Civic responsibility is at the bottom of what schools prioritize (9%) and what the public believes should be a priority (11%).[96] More (50%) would emphasize "teaching practical skills that are useful in the workplace and daily life" over "teaching academic subjects and intellectual development" (32%). [97]

They are divided about whether all students have the ability to "reach a high level of learning." A majority (52%) believes students can achieve this, while 46% think, "only some have the ability to reach a high level of learning." [98] Regardless of a student's own limitations, the public overwhelmingly believes that "most students achieve only a small part of their academic potential in school" (81%), while only 16% think "most students achieve their full potential." [99]

Education needs more funding, and the public is willing to pay more taxes to provide that funding. However, a message based solely on funding is likely to fail because the public sees many of the problems facing schools as problems money cannot fix.

Two-thirds of adults (66%) say government spends too little on public school education,[100] and 65% would like to see federal spending on education increased.[101] A majority of both parents (59%) and non-parents (53%) are willing to pay as much as $500 per year in increased taxes to provide for education. This show of support is particularly compelling since respondents were also given options to support $100 (9% favor giving $100 but not $200), and then $200 (20% favor paying $200, but not $500).[102]

However, the debate over fixing schools cannot rest on funding, since many of the problems people see are believed to be problems money cannot solve. While 33% believe that increasing funding for public schools is the most important thing that the federal government can do to improve education, 64% believe there are more important things that need to be done.[103] Only by a slim 8-point margin do people think the quality of schools is related to the amount of money spent (50% say "yes," 42% "no").[104]

Money can address problems such as run-down schools, class size, equipment and teachers' salaries. Decaying school buildings is a high priority. "Fixing run-down schools" is the strongest priority for funds (80% strongly favor), ranked even higher than reducing class size (69%), more computers (61%), teacher pay (60%), and increased security (53%). [105] The intensity of support for fixing run-down schools is likely due to Americans' desire to improve inner city schools. Fully 86% state that improving the nation's inner city schools is "very important," and 66% are willing to pay more taxes to provide the funds to improve these schools.[106]

However, the public also sees the need for fundamental changes that do not require money, such as standards and values. "High standards" is frequently at the top of the public's favorite reforms, with 85% strongly favoring "making students meet adequate academic standards to be promoted or graduated."[107]

According to the public, the problem in education is a lack of parental involvement, and "fixing" parents is the best solution. People believe a child's ability to succeed is more a function of parents than of schools, and they worry that schools are being asked to do parents' jobs.

More people rate "lack of parental involvement" as a "major problem facing schools" than any other cause, including drugs, discipline, crowding and violence. Three-quarters (78%) see lack of parental involvement as a major problem for the nation's schools; 55% say it is a major problem in their own community schools. Discipline and drugs follow, at 73% and 69% respectively for the nation's schools, 50% and 51% for community schools.[108]

Furthermore, parents are perceived to be more important than teachers in achieving educational success. Twice as many (42%) think "the involvement and attention of the parents" matters more in determining the quality of a child's education than the "quality of the teachers and the school" (21%).[109] When thinking about "learning and getting ready for school," two-thirds (66%) believe that "most young kids are better off with a parent at home full-time" rather than being in "high-quality educational child care" (19%). (Note that this finding is from a survey of Illinois residents, but we believe it to be the kind of question likely to reflect national sentiment.)[110]

At the same time, most people agree that schools are being asked to compensate for parental failures. Two-thirds (66%) believe "we are asking our schools to do too many things that really should be handled by parents at home" while only 24% think "with families and children under so many pressures today, it's important for schools to take on more responsibilities concerning students."[111]

Parents want their children to love to learn, and when they do, parents define the school as being of high quality.

Though people show strong support for testing, standards, and more parental involvement, the proof of a quality school is very simple – children who like school (61% say it is one of the most important signs of a quality school). Only 11% of kids say they love school and an additional 28% "like school a lot."[113]

% One of the Most Important Signs of School Quality[112]	
Happy children who like school	61
High graduation rates	42
High attendance rates	40
High parental involvement	40
Small class size	37
High college attendance rates	36
Strong principals	36
Availability of technology	35
Small school size	29
Extra curricular activities	25
Low teacher turnover	22
High test scores	17
The way a school looks	17
Teacher awards	17
Awards in math and science	16

The biggest challenge for children's advocates is that when early childhood education is placed within an education reform frame, it is accorded a lower priority than many of the other desired reforms.

Majorities strongly favor a variety of reforms for education. Topping the list of NEA's suggested reforms are policies that ensure a quality teacher in every classroom (64% strongly support) and increasing opportunities for higher education (62%). A majority also recognizes the need for repairing school buildings (56%), investing in low performing schools (56%), and encouraging federal funding for students with learning disabilities (54%). Early childhood education policies are supported by a majority (52%) but are last on the list of tested priorities.

Support for NEA's Opportunity to Excel Program[114] % Strongly Favor	
Ensure that every classroom has a high quality teacher by promoting teaching as a career, raising teacher pay, and providing financial assistance to teachers to continue their education and improve their skills in the classroom	64%
Make college affordable for more families by expanding college loan and grant programs, and increasing student aid	62%
Provide funding to repair schools in poor condition and build new schools, and provide assistance to help schools wire classrooms for computers	56%
Invest in low performing schools by reducing their class sizes, using higher pay to attract good teachers, and expanding before and after school programs for students	56%
Require the federal government to live up to its funding obligation of 40 percent for students with learning disabilities and provide more funding, which allow local school districts to spend more of their local funding on the entire student population	54%
Expand early childhood education by providing full funding for Head Start, expanded day care programs in local school districts, and tax credits to help families pay for kindergarten and pre-school	52%

People worry about pushing young children into an educational setting too soon.

Even when early childhood education is a priority, some are concerned about pushing kids into education too fast. Generally they believe that kids younger than six should not be in an educational environment for too long at a time.[115] They overwhelmingly prefer half-day programs (81%) to full-day programs (15%) and two or three-day-a-week programs (66%) over five-day-a-week programs (30%).[116]

Furthermore, the public values early learning programs for five-year-olds, but places less value in these programs at younger ages. While 71% feel it is "very important" for five-year-olds to spend time in an organized learning program outside the home, only 45% feel it is very important for four-year-olds and only 31% feel it is very important for three-year olds.[117]

People assess the value of these programs as helping children learn social skills, such as learning to share and play with others (35%) and being able to listen and follow instructions (29%). In fact, when forced to choose between the two, a majority (52%) prefers a social skills program to an academic program (23%).[118]

Crime Prevention

Some public opinion studies have shown that crime prevention is an effective frame for programs for youth. However, the frame has been used most frequently to promote after-school programs, and has been tested as an "after school issue" or an "after school and early education issue." Few have tested this frame in advancing policies for children under five years old, and it is not clear that a crime prevention frame will effectively prioritize policies relevant to that age group.

When thinking in a crime and violence frame, the public wants to emphasize prevention over punishment. They see after-school programs and early education programs as effective crime prevention measures. Police chiefs agree with the public about the effectiveness of after school and early education programs.

Nearly all adults agree that youth outreach programs are effective in preventing crime. Fully 86% agree (56% strongly), "America could greatly reduce violent crime by expanding preventive efforts like after-school programs for school-age children and teens, Head Start and other early childhood development programs, and interventions for troubled kids."[119]

Furthermore, police chiefs across the nation believe in the effectiveness of these crime prevention efforts. Nearly all (86%) police chiefs say "Expanding after-school programs and educational child care programs like Head Start would greatly reduce youth crime and violence." They see after-school programs and educational child care programs as more effective crime prevention strategies (69%) than prosecuting juveniles as adults (17%), hiring more police officers (13%) or installing more metal detectors in schools (1%). Police chiefs prioritize three programs: after school and summer youth programs (57%), parent coaching for high-risk families (53%), and Head Start or similar early childhood education (49%).[120]

While Americans recognize that there are frequently extenuating circumstances, they nevertheless believe children to be violent because their parents did not raise them well.

As is so often the case with children's issues, the public holds parents responsible for creating many perceived problems and for solving them. Overwhelmingly, the public places responsibility for ensuring that children are not violent at school on parents (85%) rather than schools (9%). The main cause of school shootings like Columbine, they assert, is poor upbringing by their parents (42%) followed by violence in the media (26%) and peer pressure (14%). Few think children have a genetic tendency toward violence (4%). The leading solution, therefore, is paying more attention to kids' anti-social behaviors (60%), rather than reducing violence in the media (13%), increasing school security (11%) or passing stricter gun control laws (6%).[121]

Still, parents are not alone in responsibility. The public perceives several other causes of school violence including the availability of guns and violence in the media. Even when considering juvenile crime more broadly, a majority of Americans point to a lack of strong families as the main cause (54%), followed by drugs (46%), not having a sense of right and wrong (38%), and gangs (37%). Fewer point to immaturity and bad judgment (29%), availability of guns (26%), violence on television (25%), poverty (17%) or poor schools (15%).[123]

Importance of Causes of School Shootings % Extremely Important[122]	
The home life students have today, including their relationship with their parents	57%
The availability and ease of obtaining guns by students	46%
The portrayal of violence and use of guns in today's entertainment and music	38%
The coverage given to school shootings by the news media	32%
The way schools discipline their students	31%
Bullying and teasing of students at school	29%
The size of high schools today in terms of the number of students who attend	20%
The fact that families move around and the students don't have roots in one specific town	17%

It is not clear that crime prevention is the best frame for encouraging support for early childhood efforts, but conversely it does seem clear that a child development perspective helps bring more sensitivity to juvenile justice issues.

When asked to consider the factors in determining punishment for a juvenile who has committed a crime, most look first to the type of crime committed (65%). The public is then most likely to assess whether or not the juvenile has committed a crime before (52% choose it as their second choice). Far fewer choose the age of the juvenile as the first (8%) or second (20%) factor they would consider. [124]

Still, the public wants to concentrate on prevention and rehabilitation (90%, 77% strongly) over imprisonment. Among a series of reasons to support alternatives to imprisonment, the most convincing statements include a developmental perspective: that most juveniles who commit crimes have the potential to be rehabilitated and to change (89% convincing, 42% very convincing); and that juvenile offenders often have emotional problems and need counseling not prison (84%, 44%). The strongest critique against the juvenile justice system would be that it does not try to rehabilitate juvenile offenders (57% extremely serious concern).[125]

In the few instances where a crime prevention frame has been used to promote early childhood issues, it has proven less effective than other approaches.

As noted, most of the research testing the impact of the crime prevention message has been with issues related to older children, such as after school programs. Much of this research has demonstrated significant boosts in support for after school programs after hearing a crime prevention message, particularly when delivered by a police chief in tandem with a crime victim.[126]

However, success in positioning after school programs for older children does not mean that this same message will prove effective for early childhood issues. In one recent poll about early childhood where the crime prevention message was tested, it rated much lower than messages about school performance, social development or opportunity. Crime prevention from a positive perspective ("children who participate are less likely to get involved with things like gangs…") performed better than negative messages ("children who do not participate are more likely to have problems…"), but neither approach was particularly persuasive for early childhood issues. [127]

Convincing Reason for Education[1] Programs for 3 and 4 Year Olds[128]

"I'd like to list reasons that some people have given for why it is important to have (preferred label previously chosen) programs available for3 and 4 year-old children. For each statement, please tell me whether you think it is extremely convincing, very convincing, fairly convincing, just somewhat convincing, or not really convincing."

	% Extremely Convincing	% Very Convincing
Many children who participate in (LABEL) programs do better when they enter elementary school and score higher on basic skills tests.	30	33
Many children who participate in (LABEL) programs are more self-confident, better adjusted, and less likely to be disruptive and cause problems that affect other children in the classroom when they enter elementary school.	28	30
Good (LABEL) programs help motivate young children to become problem-solvers who are more successful in school, work, and in their communities.	25	32
Having children participate in (LABEL) programs strengthens families by giving parents the resources and support they need to help their children get a good start.	25	31
Good (LABEL) programs cost a lot more than most working families can afford, leaving many parents with few alternatives.	23	25
Children who participate in (LABEL) programs are less likely to get involved with things like gangs and drugs as they get older and more likely to grow up and become productive, contributing members of the community.	***19***	***25***
Good (LABEL) programs benefit the economy and save taxpayers two dollars for every dollar invested, because these programs prevent school failure and crime and produce a better educated, more productive workforce.	19	22
Children who do NOT participate in (LABEL) programs are less self-confident, less adjusted, and more likely to be disruptive and cause problems that affect other children in the classroom when they enter elementary school.	18	17
Good (LABEL) programs benefit the economy and save taxpayers two dollars for every dollar invested.	13	20
Children who do NOT participate in (LABEL) programs are more likely to have problems in school and to get involved with things like gangs and drugs as they get older.	***14***	***16***

[1] Respondents select their preferred label (preschool, early learning, etc.), which is then used throughout.

Welfare and the Poor

Considerations of what is best for children change significantly when people are thinking about what is best for *poor* children. While they want mothers to stay home with young children, most people want poor mothers to work. While Americans dislike childcare, they strongly support childcare subsidies for poor women. The driving motivation behind this seeming inconsistency is that the public values work, and believes it is in a child's best interest to see a parent go to work every day (something it does not believe happens when parents are on welfare).

When it concerns poor women, the public stands behind the value of work: 69% agree, "Single mothers who are capable of working should work even if they have young children or other family members to care for."[129] This is not to punish the poor, but rather to help break the cycle of poverty and instill the work ethic in children of welfare parents. The public assumes welfare parents are not working, even though low-income parents express higher levels of worry than upper-income people about parents not having enough time to spend with their children due to work and other pressures (63% of those earning less than $30,000 worry a great deal compared to 46% of those earning $75,000 or more).[130]

Even parents of very young children believe the benefits of learning the value of work override the undesirability of childcare. Among parents of young children, 86% agree, 53% strongly, that "It's important for kids whose families are on welfare to see their parent working or going to school, even if it means the kids must be in child care."[131] Even among young parents who believe it is important for a parent to stay home during the child's youngest years, they *still* think it is better for parents *on welfare* to use child care so they can go to work or school (73%), while only 21% believe it is better for them to stay home.[132]

The public also views education differently when responding to children's issues from within a poverty frame. People perceive poor quality schools as leading to poverty and are then more willing to view early education programs as necessary to a child's future success. They support childcare subsidies to support work as well as to help poor children get a better start in life. Finally, education messages for low-income students are more powerful when they speak to opportunity than when they emphasize disparities.

Nearly half the public (47%) sees poor quality public schools as a major cause of poverty.[133] The scope of public education in addressing poverty includes pre-school and grade school education, in part because the public thinks a child's core personality is determined in elementary school. A majority believes that grade school has more influence than high school on the kind of person a child will be when grown (57% point to grade school, 27% high school).[134]

Similarly, the public sees quality child care as a way to help poor children climb out of poverty. Eighty percent (80%) agree, 52% strongly, that "The nation's poorest children need low-cost, high quality day care centers to have a fair chance of succeeding in school and climbing out of poverty."[135]

Messages that advocate improving education for poor students are most effective when linked to the value of opportunity. For example, fully 60% say a very good reason to increase federal spending on education is "Federal spending on higher education must be increased so that students from low-income families can have equal access to the opportunities that education provides."[136] A majority (55%) says a very good reason is "Schools in low-income areas must receive more federal funding to ensure that all students have the same access to the opportunities that education provides as students in well-funded school districts." [137] In comparison, a message about overt disparities proves far weaker in galvanizing support. Forty-two percent say a very good reason to support more funding is "Federal spending on education must be increased to minimize disparities in the quality of education across the nation." [138]

The public demonstrates high levels of support for child care assistance to support the working poor, and strong levels of support for Head Start as a way to give poor children greater opportunities.

Of a variety of actions designed to help the poor, more people support expanding subsidies for day care (85%) and increasing the minimum wage (85%). The seeming conflict in public opinion between what is best for all children and what is best for poor children helps to explain why parents of young children can both support giving a tax break to parents who stay at home to care for their children (64% say it would be very helpful), and also support increasing funding for the Head Start program for low-income families (60% very helpful). [140] It helps explain why fully 86% support childcare assistance for all low-income families so they can work,[141] a higher level of support than for financial assistance for quality childcare for working families generally (65%).[142]

Government Actions to Help Poor	
% Support[139]	
Increasing the minimum wage	85
Expanding subsidized day care	85
Spending more for medical care for poor people	83
Increasing tax credits for low-income workers	80
Spending more for housing for poor people	75
Making food stamps more available to poor people	61
Guaranteeing everyone a minimum income	57
Increasing cash assistance for families	54

In considering a series of policies to address poverty, such as increasing the minimum wage, expanding childcare subsidies, and improving access to health care, a majority (56%) feels so strongly about these solutions that they are willing to pay more in taxes to effect them, with 44% willing to pay $200 more in taxes. [143] At the same time, however, 86% agree, "If spent more wisely, there should be enough money in the existing federal budget to take care of the poor."[144]

The most critical fault in the poverty frame is the fact that positioning children's issues as poor children's issues limits personal engagement in helping to enact public policy change.

As noted in this section, day care subsidies and programs for low-income children such as Head Start are very popular programs. People frequently place higher priority on expanding opportunities for poor children, using these programs to "level the playing field." However, making this an issue for all helps people personally identify with the issue and a majority (55%) would prefer that early learning programs be free to all children (55%) rather than make them free just to poor children (39%).[145]

The Role for State Government

As noted throughout this section, the level of public support for government programs for young children depends upon the message frame. For example, the public is less likely to support government funding for childcare if they are thinking of it in the context of helping working families, and more likely to support funding in the context of education. Beyond funding, the public looks to state government to set standards for early learning programs, but they are less enthusiastic about state government operating or evaluating these programs.

The public believes state government should be ensuring the safety of early learning programs through licensing and inspections (71% strongly support) and that state government should provide funding and financial support so that all parents who want to can afford to enroll their children (64% strongly support). A majority (59%) also believes state government should set standards for learning and teacher training. Fewer strongly support state governments working with school systems to operate early learning programs (43%) or holding programs accountable through evaluation standards (34%).[146]

The existing economic climate will make it difficult for community stakeholders to advance new policies within state legislatures unless the new policies are tied to existing priorities. State legislators see the upcoming budgets as requiring spending cuts, and view education, the economy, jobs and a balanced budget as the highest priorities.

The National Center for Children in Poverty sponsored public opinion research of state policymakers in Spring 2002. The context of the poll is poverty, so it is too limited to be useful in developing a broader frame for early childhood that is the focus of this research effort. However, the research is useful in demonstrating the legislative context in which communities will be operating.

More than two-thirds (68%) of state legislators report that their state's economy has gotten worse over the past year. Policymakers are getting ready to make tough choices in the upcoming budget session: 54% of state legislators say they will be "looking at making spending cuts" in dealing with their state's budget (20% say the cuts will be "substantial").[148]

Their top priority is education, with 45% saying that improving public education is "one of the most important priorities." Note that "public education" is rated as a high priority by many more legislators than related "educational" issues such as after school programs (33%) or affordable child care (28%). The economy, creating jobs and balancing the state budget are the next highest priorities (40%, 39% and 39% respectively).[149]

State Legislators' Priorities
% "One of the Most Important Priorities"[147]

Improving public education	45%
Improving state economy	40%
Creating jobs	39%
Balancing state budget	39%
Reducing the number of people on welfare	36%
Providing after school programs	33%
Helping low-income families with children	30%
Provide affordable child care	28%
Reduce hunger and homeless	27%
Reducing child poverty	27%
Insure uninsured children	27%
Health insurance for child of working poor	26%
Affordable housing	26%
Help vulnerable families	24%
Hold down taxes	23%
Cut state spending	22%
Combat terrorism	21%
Increasing state minimum wage	18%
Cutting taxes	17%
Improve family values	16%
Protect patients in HMOs	15%
Protect environment	15%
Closing tax loopholes	13%
Fighting crime	12%

Policymakers' responses to these priorities demonstrate that they, just like the public, frame issues, and the framing of an issue influences its priority. For example, several of the issues with lower ratings are economic issues, yet they do not receive the same priority as the economy and jobs because they have not traditionally been framed as economic issues -- taxes, minimum wage, and housing. Similarly, "reducing the number of people on welfare" is rated as a higher priority than "helping low-income families with children" even though these two categories could reflect the same policies and the same audience.

Again, within a poverty framework, legislators see skill development and education as more effective approaches to alleviating poverty than adjusting income or expenses for low-income families. Like the public, legislators value the opportunity that education can provide for moving a family out of poverty for the long-term.

State Legislators' Views of Policy Effectiveness
% Saying "One of the Most Effective Policies"[150]

Build knowledge and skill	35%
Expand educational opportunities	30%
Promote parental responsibility	19%
Raise the income of low-income families	16%
Reduce expenses of working families	13%
Promote marriage	10%
Reduce expenses of low-income families	10%

Conclusions

When confronted with most early childhood issues, the public consistently defaults to an assessment that "parents are responsible." This means that communications must be very deliberate in framing early childhood in a way that promotes societal responsibility.

People value good parenting highly. They evaluate their own actions and the nation's public policies through the lens of what they believe it means to be a good parent. This definition of good parenting, however, is not based on a philosophy of child development that is in line with child development experts. An appropriate, vigorous model of development would likely lead to stronger support for sound early childhood policies.

Each of the existing frames – education, work, poverty, and crime prevention – leads to support for some policies. Advocates with a narrow policy perspective might be well served by these frames. None of these frames, however, creates a "whole child" perspective that would unite the full range of early childhood policies.

The task for communications, then, becomes developing a message framework that attaches a developmental perspective, a whole child perspective, to the definition of being a good parent and a good citizen. Only in this way is it conceivable that a full range of early child policies can be advanced without falling prey to competing policies. This is the lesson we derive from the existing opinion research and one that must guide future studies.

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[1] ABC News and the Washington Post, 1507 adults nationally, January 24-27, 2002.
[2] Gallup Polls – Gallup News Service, Jan. 24, 01
[3] "Accountability for All: What Voters Want from Education Candidates," sponsored by Public Education Network and Edweek magazine, conducted by Lake Snell Perry and Associates, 800 voters with an oversample of 125 registered African-American voters and 125 registered Latino voters, January 15–21, 2002.
[4] "Accountability for All: What Voters Want from Education Candidates," sponsored by Public Education Network and Edweek magazine, conducted by Lake Snell Perry and Associates, 800 voters with an oversample of 125 registered African-American voters and 125 registered Latino voters, January 15–21, 2002.
[5] "Accountability for All: What Voters Want from Education Candidates," sponsored by Public Education Network and Edweek magazine, conducted by Lake Snell Perry and Associates, 800 voters with an

oversample of 125 registered African-American voters and 125 registered Latino voters, January 15–21, 2002.

[6] Sponsored by the Committee for Education Funding, conducted by Ipsos Reid, 1000 adults, Feb 1-3, 2002.

[7] "What Grown Ups Understand About Child Development," sponsored by Civitas, Zero to Three and the Brio Corporation, conducted by DYG, Inc. 3000 adults nationwide, including 1066 parents of children aged newborn through six. June 12 – July 5, 2000.

[8] NORC General Social Survey, 1998.

[9] NORC General Social Survey, 1983-87.

[10] NORC General Social Survey, 1994.

[11] NORC General Social Survey, 1998.

[12] Washington Post/Kaiser Family Foundation/Harvard University Gender Poll, 1,202 adults nationally, Aug. 14-Sept. 7, 1997.

[13] Washington Post/Kaiser Family Foundation/Harvard University Gender Poll, 1,202 adults nationally, Aug. 14-Sept. 7, 1997.

[14] Washington Post/Kaiser Family Foundation/Harvard University Gender Poll, 1,202 adults nationally, Aug. 14-Sept. 7, 1997.

[15] "What Grown Ups Understand About Child Development," sponsored by Civitas, Zero to Three and the Brio Corporation, conducted by DYG, Inc. 3000 adults nationwide, including 1066 parents of children aged newborn through six. June 12 – July 5, 2000.

[16] "Motherhood Today -- A Tougher Job, Less Ably Done,"sponsored by the Pew Research Center for The People & The Press,conducted by Princeton Survey Research Associates, 1,101 women nationally, March 14-26, 1997.

[17] Hart and Teeter/NBC/Wall Street Journal, 6/99.

[18] Greenberg/Quinlan Democracy Corps, 12/99.

[19] "Necessary Compromises" by Public Agenda,815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.

[20] "Motherhood Today -- A Tougher Job, Less Ably Done,"sponsored by the Pew Research Center for The People & The Press,conducted by Princeton Survey Research Associates, 1,101 women nationally, March 14-26, 1997.

[21] Kids These Days, Public Agenda.

[22] "Motherhood Today -- A Tougher Job, Less Ably Done," sponsored by the Pew Research Center for The People & The Press, conducted by Princeton Survey Research Associates, 1,101 women nationally, March 14-26, 1997.

[23] "Motherhood Today -- A Tougher Job, Less Ably Done," sponsored by the Pew Research Center for The People & The Press, conducted by Princeton Survey Research Associates, 1,101 women nationally, March 14-26, 1997.

[24] "Motherhood Today -- A Tougher Job, Less Ably Done," sponsored by the Pew Research Center for The People & The Press, conducted by Princeton Survey Research Associates, 1,101 women nationally, March 14-26, 1997.

[25] Washington Post/Kaiser Family Foundation/Harvard University Gender Poll, 1,202 adults nationally, Aug. 14-Sept. 7, 1997.

[26] Roper Center/University of Connecticut, 3/97.

[27] "What Grown Ups Understand About Child Development," sponsored by Civitas, Zero to Three and the Brio Corporation, conducted by DYG, Inc. 3000 adults nationwide, including 1066 parents of children aged newborn through six. June 12 – July 5, 2000.

[28] "Motherhood Today -- A Tougher Job, Less Ably Done,"sponsored by the Pew Research Center for The People & The Press,conducted by Princeton Survey Research Associates, 1,101 women nationally, March 14-26, 1997.

[29] Princeton Survey Research/Pew, 5/99.

[30] Washington Post/Henry J. Kaiser Family Foundation/Harvard University Value Study, 2,025 adults nationally, July 29-August 18, 1998.

[31] Washington Post/Henry J. Kaiser Family Foundation/Harvard University Value Study, 2,025 adults nationally, July 29-August 18, 1998.

[32] Washington Post/Kaiser Family Foundation/Harvard University Gender Poll, 1,008 adults on November 20-23, 1997.
[33] Washington Post/Kaiser Family Foundation/Harvard University Gender Poll, 1,008 adults on November 20-23, 1997.
[34] Washington Post/Kaiser Family Foundation/Harvard University Gender Poll, 1,008 adults on November 20-23, 1997.
[35] Washington Post/Kaiser Family Foundation/Harvard University Gender Poll, 1,008 adults on November 20-23, 1997.
[36] Survey of Americans on Gender in the Workplace, sponsored by the Washington Post, Kaiser Family Foundation, Harvard University Survey Project, conducted by Chilton Research Services, 804 adults nationally, November 17-23, 1997.
[37] Washington Post/Kaiser Family Foundation/Harvard University Gender Poll, 1,202 adults nationally, Aug. 14-Sept. 7, 1997.
[38] Washington Post/Kaiser Family Foundation/Harvard University Gender Poll, 1,202 adults nationally, Aug. 14-Sept. 7, 1997.
[39] Washington Post/Kaiser Family Foundation/Harvard University Gender Poll, 1,202 adults nationally, Aug. 14-Sept. 7, 1997.
[40] Washington Post/Kaiser Family Foundation/Harvard University Gender Poll, 1,202 adults nationally, Aug. 14-Sept. 7, 1997.
[41] The Shell Survey, conducted by Peter Hart Research, 1040 women and 413 men, January 7-13, 2000.
[42] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[43] Washington Post poll. 1,477 registered voters on September 7 -17, 2000.
[44] Conducted by the Gallup Organization, 1,015 adults nationally, April 20-22, 2001.
[45] The Gallup Organization, April 20-22, 2001 and July 25-28, 1991.
[46] Conducted by the Gallup Organization, June 11-17, 2001.
[47] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[48] "Motherhood Today -- A Tougher Job, Less Ably Done," sponsored by the Pew Research Center for The People & The Press, conducted by Princeton Survey Research Associates, 1,101 women nationally, March 14-26, 1997.
[49] "Motherhood Today -- A Tougher Job, Less Ably Done," sponsored by the Pew Research Center for The People & The Press, conducted by Princeton Survey Research Associates, 1,101 women nationally, March 14-26, 1997.
[50] "What will parents vote for" by Charney Research for the National Parenting Association and Offspring Magazine, 500 American parents and oversamples of 50black parents, 50 Latino parents, and 50 parents who were welfare recipients, January 26 to February 8, 2000.
[51] "What will parents vote for" by Charney Research for the National Parenting Association and Offspring Magazine, 500 American parents and oversamples of 50black parents, 50 Latino parents, and 50 parents who were welfare recipients, January 26 to February 8, 2000.
[52] "What will parents vote for" by Charney Research for the National Parenting Association and Offspring Magazine, 500 American parents and oversamples of 50black parents, 50 Latino parents, and 50 parents who were welfare recipients, January 26 to February 8, 2000.
[53] Washington Post/Kaiser Family Foundation/Harvard University Gender Poll, 1,202 adults nationally, Aug. 14-Sept. 7, 1997.
[54] Washington Post/Kaiser Family Foundation/Harvard University Gender Poll, 1,202 adults nationally, Aug. 14-Sept. 7, 1997.
[55] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[56] "What Grown Ups Understand About Child Development," sponsored by Civitas, Zero to Three and the Brio Corporation, conducted by DYG, Inc. 3000 adults nationwide, including 1066 parents of children aged newborn through six. June 12 – July 5, 2000.

[57] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[58] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[59] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[60] Washington Post/Kaiser Family Foundation/Harvard University Gender Poll, 1,202 adults nationally, Aug. 14-Sept. 7, 1997.
[61] "What will parents vote for" by Charney Research for the National Parenting Association and Offspring Magazine, 500 American parents and oversamples of 50 black parents, 50 Latino parents, and 50 parents who were welfare recipients, January 26 to February 8, 2000.
[62] 1997 Pew Values Update Survey, conducted by Princeton Survey Research Associates, 1,165 adults nationally, November 5-9, 1997 and November 13-17, 1997.
[63] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[64] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[65] Sponsored by the National Institute for Early Education Research, conducted by Hart Research, 3230 voters nationally, November 29-December 13, 2001.
[66] "What Grown Ups Understand About Child Development," sponsored by Civitas, Zero to Three and the Brio Corporation, conducted by DYG, Inc. 3000 adults nationwide, including 1066 parents of children aged newborn through six. June 12 – July 5, 2000.
[67] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[68]."Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[69] Princeton Survey Research Associates/Newsweek, 8/00.
[70] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[71] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[72]"Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[73] "What Grown Ups Understand About Child Development," sponsored by Civitas, Zero to Three and the Brio Corporation, conducted by DYG, Inc. 3000 adults nationwide, including 1066 parents of children aged newborn through six. June 12 – July 5, 2000.
[74] "What Grown Ups Understand About Child Development," sponsored by Civitas, Zero to Three and the Brio Corporation, conducted by DYG, Inc. 3000 adults nationwide, including 1066 parents of children aged newborn through six. June 12 – July 5, 2000.
[75] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[76] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.

[77] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[78] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[79] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[80] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[81] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[82] "What Grown Ups Understand About Child Development," sponsored by Civitas, Zero to Three and the Brio Corporation, conducted by DYG, Inc. 3000 adults nationwide, including 1066 parents of children aged newborn through six. June 12 – July 5, 2000.
[83] "What Grown Ups Understand About Child Development," sponsored by Civitas, Zero to Three and the Brio Corporation, conducted by DYG, Inc. 3000 adults nationwide, including 1066 parents of children aged newborn through six. June 12 – July 5, 2000.
[84] "What Grown Ups Understand About Child Development," sponsored by Civitas, Zero to Three and the Brio Corporation, conducted by DYG, Inc. 3000 adults nationwide, including 1066 parents of children aged newborn through six. June 12 – July 5, 2000.
[85] The Shell Poll, conducted by Peter Hart Research, 1264 adults nationally, November 5-8, 1998.
[86] The Shell Poll, conducted by Peter Hart Research, 1264 adults nationally, November 5-8, 1998.
[87] 1999 Millennium Survey, sponsored by the Pew Research Center, conducted by Princeton Survey Research Associates, 1546 adults nationally, April 6 – May 6, 1999.
[88] 1999 Millennium Survey, sponsored by the Pew Research Center, conducted by Princeton Survey Research Associates, 1546 adults nationally, April 6 – May 6, 1999.
[89] Sponsored by the Advertising Council and Ronald McDonald House Charities, conducted by Public Agenda, 1005 adults nationally, December 1-8, 1998.
[90] The Shell Poll, conducted by Peter Hart Research, 1123 adults nationally, July 17-20, 1998.
[91] Gallup trend.
[92] Sponsored by Phi Delta Kappa, conducted by the Gallup Organization, 1,108 adults nationally, conducted May 23-Jun. 6, 2001.
[93] AAUW Survey, by Lake Research 675 women nationally, June 1998.
[94] Sponsored by Phi Delta Kappa, conducted by the Gallup Organization, 1,108 adults nationally, conducted May 23-Jun. 6, 2001.
[95] Sponsored by the Washington Post/Kaiser Family Foundation/Harvard university, conducted by ICR, 1225 registered voters nationally, May 11-22, 2000.
[96] Shell Oil Company Poll, by Hart Research, 1123 adults nationally, July 1998.
[97] The Shell Poll, conducted by Peter Hart Research, 1123 adults nationally, July 17-20, 1998.
[98] Sponsored by Phi Delta Kappa, conducted by the Gallup Organization, 1,108 adults nationally, conducted May 23-Jun. 6, 2001.
[99] Sponsored by Phi Delta Kappa, conducted by the Gallup Organization, 1,108 adults nationally, conducted May 23-Jun. 6, 2001.
[100] Conducted by Louis Harris and Associates, 1011 adults nationally, April 22-27, 1998.
[101] The ABC News/Washington Post Poll, 1083 adults nationally, March 30 – April 2, 2000.
[102] NPR/Kaiser/Kennedy School Education Survey, conducted by ICR, 1422 adults nationally, June 25 – July 19, 1999.
[103] Sponsored by the Washington Post/Kaiser Family Foundation/Harvard university, conducted by ICR, 1225 registered voters nationally, May 11-22, 2000.
[104] "Attitudes Toward the Public Schools 1998 Survey" sponsored by Phi Delta Kapa, by Gallup, 1151 adults nationally, June 1998.

[105] NPR/Kaiser/Kennedy School Education Survey, conducted by ICR, 1422 adults nationally, June 25 – July 19, 1999.
[106] "Attitudes Toward the Public Schools 1998 Survey" sponsored by Phi Delta Kapa, by Gallup, 1151 adults nationally, June 1998.
[107] NPR/Kaiser/Kennedy School Education Survey, conducted by ICR, 1422 adults nationally, June 25 – July 19, 1999.
[108] NPR/Kaiser/Kennedy School Education Survey, conducted by ICR, 1422 adults nationally, June 25 – July 19, 1999.
[109] The Shell Poll, conducted by Peter Hart Research, 1123 adults nationally, July 17-20, 1998.
[110] Illinois Early Childhood Statewide Survey, sponsored by Voices for Illinois Children, conducted by Market Strategies, 603 registered voters in Illinois, May 3-6, 2001.
[111] The Shell Poll, conducted by Peter Hart Research, 1123 adults nationally, July 17-20, 1998.
[112] Sponsored by the American Association of School Administrators, conducted by Lake Snell Perry & Associates, 750 K-12 public school parents, October 14-19, 1999.
[113] The Shell Education Survey, conducted by Peter Hart Research, 1015 high school students, June 8-29, 1999.
[114] Sponsored by the National Education Association, conducted by Greenberg Quinlan Research and The Tarrance Group, 1000 registered voters nationwide and an oversample of 200 registered voters with children under 18 years of age, February 4 - 7, 2001.
[115] Sponsored by I Am Your Child, conducted by Hart Research and Market Strategies, 12 focus groups, February 2001.
[116] Sponsored by the National Institute for Early Education Research, conducted by Hart Research, 3230 voters nationally, November 29-December 13, 2001.
[117] Sponsored by the National Institute for Early Education Research, conducted by Hart Research, 3230 voters nationally, November 29-December 13, 2001.
[118] Sponsored by the National Institute for Early Education Research, conducted by Hart Research, 3230 voters nationally, November 29-December 13, 2001.
[119] Sponsored by Fight Crime: Invest in Kids, conducted by the Opinion Research Corporation, 1,010 adults nationally, August 4-7, 2000
[120] Poll of Police Chiefs, sponsored by Fight Crime: Invest in Kids, conducted by George Mason University, 855 police chiefs, October 14-27, 1999.
[121] April 2000 News Interest Index, by the Pew Research Center for the People and the Press, 1000 adults nationally, April 12-16, 2000.
[122] Conducted by the Gallup Organization, March 26-28, 2001.
[123] National Survey on Juvenile Justice, sponsored by the Youth Law Center, conducted by Belden Russonello and Stewart, 2003 adults nationally, January 30 – February 12, 1999.
[124] National Survey on Juvenile Justice, sponsored by the Youth Law Center, conducted by Belden Russonello and Stewart, 2003 adults nationally, January 30 – February 12, 1999.
[125] National Survey on Juvenile Justice, sponsored by the Youth Law Center, conducted by Belden Russonello and Stewart, 2003 adults nationally, January 30 – February 12, 1999.
[126] Sponsored by Fight Crime: Invest in Kids, conducted by RMA, Inc., September 2000.
[127] Sponsored by the National Institute for Early Education Research, conducted by Hart Research, 3230 voters nationally, November 29-December 13, 2001.
[128] Sponsored by the National Institute for Early Education Research, conducted by Hart Research, 3230 voters nationally, November 29-December 13, 2001.
[129] "Devolution Survey on Healthcare and Welfare Reform Issues" sponsored by the Kellog Foundation, conducted by Bonney and Company, 2221 adults, November 4-27, 1998.
[130] ICR/Washington Post, 10/99.
[131] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[132] Conducted by Public Agenda, 754 parents with children age 5 and younger, who believe it is important for a parent to stay home during a child's youngest years, June 1-15, 2000.
[133] "Poverty in America," NPR/Kaiser/Kennedy School Poll, 1,952 adults, January 4-February 27, 2001.
[134] Sponsored by Time/CNN, conducted by Yankelovich Partners, 1031 adults nationally, June 9-10, 1999.

[135] Conducted by Public Agenda, June 1-15, 2000.
[136] Sponsored by the Committee For Education Funding, conducted by Ipsos Reid, 1,000 adults, March 8-10, 2002.
[137] Sponsored by the Committee For Education Funding, conducted by Ipsos Reid, 1,000 adults, March 8-10, 2002.
[138] Sponsored by the Committee For Education Funding, conducted by Ipsos Reid, 1,000 adults, March 8-10, 2002.
[139] "Poverty in America," NPR/Kaiser/Kennedy School Poll, 1,952 adults, January 4-February 27, 2001.
[140] "Necessary Compromises" by Public Agenda, 815 parents of children 5 years old or under, as well as 444 parents of children 6 to 17 and 214 adults who are not parents. It also includes responses from a nationwide mail survey of 218 employers and 216 children's advocates, June 1 and June 15, 2000.
[141] "Devolution Survey on Healthcare and Welfare Reform Issues" sponsored by the WK Kellog Foundation, conducted by Bonney and Company, 2221 adults, November 4-27, 1998.
[142] "What Grown Ups Understand About Child Development," sponsored by Civitas, Zero to Three and the Brio Corporation, conducted by DYG, Inc. 3000 adults nationwide, including 1066 parents of children aged newborn through six. June 12 – July 5, 2000.
[143] "Poverty in America," NPR/Kaiser/Kennedy School Poll, 1,952 adults, January 4-February 27, 2001.
[144] "Devolution Survey on Healthcare and Welfare Reform Issues" sponsored by the Kellog Foundation, conducted by Bonney and Company, 2221 adults, November 4-27, 1998.
[145] Sponsored by the National Institute for Early Education Research, conducted by Hart Research, 3230 voters nationally, November 29-December 13, 2001.
[146] Sponsored by the National Institute for Early Education Research, conducted by Hart Research, 3230 voters nationally, November 29-December 13, 2001.
[147] Sponsored by the National Center for Children in Poverty, conducted by the Mellman Group, 553 state legislators, February 15 – March 15, 2002.
[148] Sponsored by the National Center for Children in Poverty, conducted by the Mellman Group, 553 state legislators, February 15 – March 15, 2002.
[149] Sponsored by the National Center for Children in Poverty, conducted by the Mellman Group, 553 state legislators, February 15 – March 15, 2002.
[150] Sponsored by the National Center for Children in Poverty, conducted by the Mellman Group, 553 state legislators, February 15 – March 15, 2002.

WHAT IS INFANT MENTAL HEALTH?

We're talking about children from birth to age six and their capacity to:

- Manage and express a full range of positive and negative emotions
- Develop close, satisfying relationships with others
- Actively explore environments and learn

Sometimes known as social/emotional health, it occurs when:

- Young children get what they need from their parents and all primary caregivers
- Individual needs are recognized and responded to in warm, sensitive ways

Society's Responsibilities

- Begin the work prenatally with supportive health, educational, and social welfare programs for parents and families
- Understand developmental stages and provide programs that support each stage of development
- Promote appropriate positive parenting for all children, recognizing that the parent/child relationships must be the focus
- Recognize and provide for children and families' special needs
- Protect young children's needs through quality child care
- Understand and support diverse cultures
- Recognize risk factors that should be addressed early; i.e., poverty, substance abuse, teen pregnancy, parent depression, health factors, etc.
- Evaluate and research programs to accurately assess what is working well and what requires change
- Provide ongoing training programs for multiple disciplines that deal with young children and families to ensure that professionals understand infant mental health so that they can promote good practice, prevent problems, and intervene when necessary with appropriate services

What are the Multiple Disciplines?

Health, Mental Health, Early Childhood Education and Special Education, Child Care, Social Welfare Programs, Home Visiting and Parent Education Programs, Judicial System, Universities and Training Organizations

WHY IS INFANT MENTAL HEALTH IMPORTANT?

- Because the most critical brain development occurs in the first 3 years of life
- What happens in society (crime, school failure, domestic violence, etc.) is often the result of what affects the brain during this critical period

RELATIONSHIPS, RESPECT, AND RESPONSIVENESS ARE KEY!

Kansas Association for Infant and Early Childhood Mental Health
kaimh-subscribe@yahoogroups.com

GET THE LEAD OUT

PREVENTION

How to protect children against lead poisoning

Illinois Department of Public Health

Of the 1.2 million children aged 6 years and younger in Illinois, approximately 110,000 children have blood lead levels that are too high.

Lead poisoning does not always produce symptoms. It can be detected with a simple blood test.

Because lead is found everywhere, city, suburban and rural children are all at risk if they breathe in lead dust or eat lead paint and dust.

Read this brochure to find out more about lead poisoning. Call your doctor, your local health department or the Illinois Department of Public Health's Illinois Lead Program at 217-782-3517 or 866-909-3572 or TTY 800-547-0466 for information on having your home inspected for lead and removing lead hazards safely.

HAVE YOUR CHILD TESTED FOR LEAD POISONING.

PREVENTION

How to protect children against lead poisoning

GET THE LEAD OUT

WHAT IS LEAD POISONING?

Lead poisoning is too much lead in the body. Lead is especially harmful to the small bodies of children younger than 6 years old.

Lead gets in their bodies when children eat lead or breathe it in. Lead is in —

- paint
- dust
- drinking water
- dirt outside

HOW DOES LEAD AFFECT A CHILD?

Even small amounts of lead can harm a child's brain, kidneys and stomach. Lead poisoning can slow a child's development and cause learning and behavior problems.

Your child may have lead poisoning and not feel sick. Or your child may have stomach aches, headaches, a poor appetite or trouble sleeping, or be cranky, tired or restless.

SCREEN YOUR CHILD FOR LEAD.

All children 6 months through 6 years old should be assessed for their risk for lead poisoning. Illinois state law requires all children entering day care, nursery school, preschool or kindergarten to provide proof of a blood lead test or an assessment.

A screening test is done with blood taken from the finger or vein. If too much lead is in the blood, your child may need treatment. To find out how to test your child, call your doctor or local health department.

Women planning to have a baby should be tested for lead. Lead in a mother's body can cause a baby to be born too small and too early.

PROTECT YOUR CHILD FROM LEAD.

Wash your children's hands before they eat.

Foods high in iron and calcium — lean meat, eggs, raisins, greens, milk, cheese, fruit and potatoes — help get lead *out* of a child's system. Limit foods high in fat and oil — fried foods and snacks like potato chips — which *keep* lead in a child's system.

Clean up chipping and peeling paint inside and outside your home.

Clean up paint chips and lead dust in window sills and on the floor near windows, doorways and woodwork. Use a damp mop or cloth and a cleaning product.

Wash your child's toys often. Throw away lead-painted toys.

Do not store food in open cans or pottery.

If you work with lead, shower and change clothes before coming home. Wash your work clothes separately.

Run cold water for a few minutes before using it for cooking and drinking. Do not use water from the hot water tap for cooking, drinking or making formula.

IF YOU THINK YOUR HOME HAS LEAD PAINT.

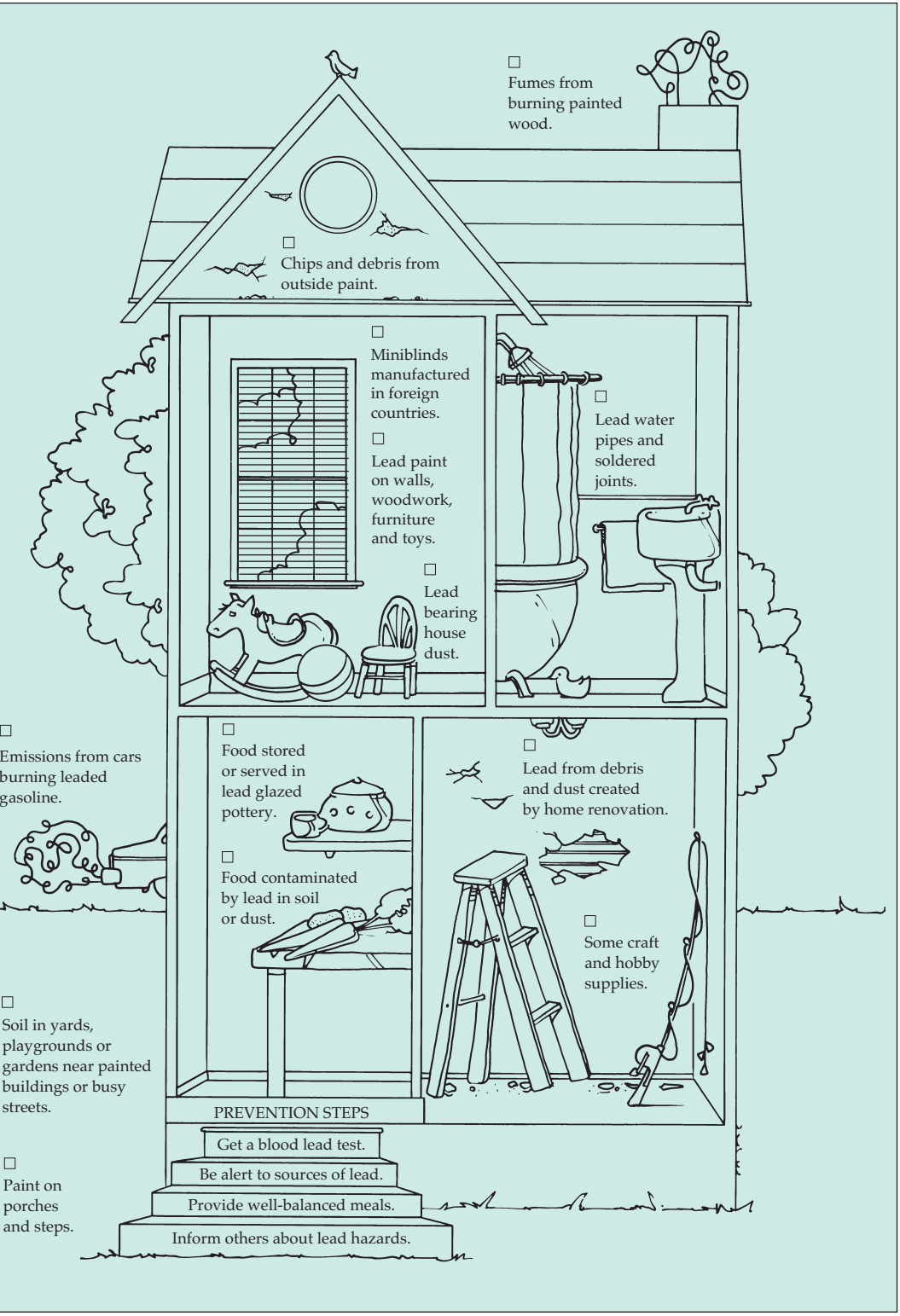
Removing lead paint is very dangerous. Do not do it yourself. Call your local health department or the Illinois Department of Public Health's Illinois Lead Program at 217-782-3517 or 866-909-3572 or TTY 800-547-0466 for information on how to remove lead paint safely.

YOUR CHILD MAY HAVE LEAD POISONING IF —

- He lives in or visits a home built before 1978 with peeling or chipping paint.
- She has been around dust from sanding or removing old paint.
- You live near a highway or industry that uses lead.
- You have lead water pipes or fixtures.
- You live with someone who works with lead.

Other sources of lead are foods grown in contaminated soil; foods stored in hand-made pottery or open cans; bullets; fishing sinkers; and hobbies that use lead, such as ceramics and stained glass.

Drawing Courtesy of Massachusetts Department of Public Health


Fumes from burning painted wood.
Chips and debris from outside paint.
Miniblinds manufactured in foreign countries.
Lead paint on walls, woodwork, furniture and toys.
Lead bearing house dust.
Lead water pipes and soldered joints.
Emissions from cars burning leaded gasoline.
Food stored or served in lead glazed pottery.
Food contaminated by lead in soil or dust.
Lead from debris and dust created by home renovation.
Some craft and hobby supplies.
Soil in yards, playgrounds or gardens near painted buildings or busy streets.
Paint on porches and steps.
PREVENTION STEPS
Get a blood lead test.
Be alert to sources of lead.
Provide well-balanced meals.
Inform others about lead hazards.

State of Illinois
Rod R. Blagojevich, Governor

Department of Public Health
Damon T. Arnold, M.D., M.P.H., Director

ALL CHILDREN AGES 6 MONTHS THROUGH 6 YEARS SHOULD BE ASSESSED FOR LEAD POISONING EVERY YEAR.

For further information,
contact the Illinois Department of Public Health's **Illinois Lead Program.**

866-909-3572
217-782-3517
TTY 800-547-0466
525 W. Jefferson St. • Springfield, IL 62761

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Government of the District of Columbia

Lead *In the District of Columbia* Fact Sheet

What Are the Health Effects of Lead?

Lead can pose a significant risk to health if too much of it enters your body. Even small amounts of lead can be harmful if swallowed or inhaled. If lead accumulates in the body over many years, it can cause damage to the brain, red blood cells, and kidneys.

Lead from chipping and flaking paint, if ingested, can cause significant health impacts especially for small children.

Lead in drinking water, although rarely the sole cause of lead poisoning, can significantly increase a person's total lead exposure, particularly the exposure of infants who drink baby formulas and concentrated juices that are mixed with water. The EPA estimates that drinking water can make up 20 percent or more of a person's total exposure to Lead.

Should My Child Be Screened?

In general, all high-risk children need lead screening. Children, under the age of 6 may be at high risk if he or she:

- lives in an area that has a high number of older homes (built before 1950),
- lives in or regularly visits a home built before 1950,
- lives in or regularly visits a home built before 1975 that has recently been remodeled,
- has had a brother or sister with lead problems, or
- Resides in an area with reported elevated lead level in water.

What Else Can I Do to Protect My Child?

In your kitchen you can:

- Feed your child a well-balanced diet that's high in iron, calcium and vitamin C – it helps protect the body against lead.
- Don't store food in open cans.
- Don't use pottery for cooking or serving if you're unsure about its glaze.
- If you suspect lead, draw drinking and cooking water only from the cold tap after letting it run for a minute.
- Have your water tested.

In your home you can:

- Be alert for chipping and flaking paint.
- Use only safe interior paints on toys, walls, furniture, and other items.
- Replace plastic blinds made outside the U.S. with a type that is lead-free.

With your child:

- Don't allow your child to put things in his or her mouth that may be dirty or have paint on them.
- Keep children from chewing window sills or other painted surfaces.
- Don't allow your child to eat snow or icicles.
- Wash children's hands often, especially before they eat and before nap time and bedtime.
- Keep play areas clean. Wash bottles, pacifiers, toys, and stuffed animals regularly.
- Make sure children eat nutritious, low-fat meals high in iron and calcium, such as spinach and dairy products. Children with good diets absorb less lead.

For More Information Call:
202.535.2626

Government of the District of Columbia
Anthony A. Williams, Mayor

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DOH
DEPARTMENT OF HEALTH
James A. Buford, Director

If you work with lead:
• Don't bring it home with you.
• Shower and change before coming home.
• Wash your clothes separately from your family's clothes.
• Follow all occupational safety guidelines for cleaning and storing work clothes and equipment.

What You Can Do Now To Protect Your Family

If you suspect that your house has lead hazards, you can take some immediate steps to reduce your family's risk:

- If you rent, notify your landlord of peeling or chipping paint.
- Clean up paint chips immediately.
- Clean floors, window frames, window sills, and other surfaces weekly. Use a mop or sponge with warm water and a general all-purpose cleaner or a cleaner made specifically for lead.
  REMEMBER: NEVER MIX AMMONIA AND BLEACH PRODUCTS TOGETHER SINCE THEY CAN FORM A DANGEROUS GAS.
- Thoroughly rinse sponges and mop heads after cleaning dirty or dusty areas.
- Clean or remove shoes before entering your home to avoid tracking in lead from soil.

How Does Lead Enter Our Drinking Water?

Lead is unusual among drinking water contaminants in that it seldom occurs naturally in water supplies like rivers and lakes. Lead enters drinking water primarily as a result of the corrosion, or wearing away, of materials containing lead in the household plumbing and water service lines. These materials include lead-based solder used to join copper pipe, brass, and chrome-plated brass faucets, and in some cases, pipes made of lead that connect your house to the water main (service lines). In 1986, Congress banned the use of lead solder containing greater than 0.2% lead, and restricted the lead content of faucets, pipes and other plumbing materials to 8.0%.

Are There Screening Measures Available?

The level of lead in your child's blood can be measured, and early detection means early intervention. Measures include:

- A blood test can reveal if there's an elevated level of lead in your child's blood.
- A second blood test is usually done if a child's screening shows that lead may be present. X-rays and other tests may be necessary.
- Follow-up questions will be asked to learn about the child's behavior, health, and symptoms; anything the child has chewed on or swallowed; possible sources of lead; the child's diet; and/or family medical history.
- Other measures may include home inspection for lead sources, or counseling about how to protect children.

What Actions Can I Take to Reduce Exposure to Lead in Drinking Water?

Despite our best efforts mentioned earlier to control water corrosivity and remove lead from the water supply, lead levels in some homes or buildings can be high. To find out whether you need to take action in your home, have your drinking water tested to determine if it contains excessive concentrations of lead. Testing the water is essential because you cannot see, taste, or smell lead in drinking water.

For More Information Call:
202.535.2626

Government of the District of Columbia
Anthony A. Williams, Mayor

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DOH
DEPARTMENT OF HEALTH
James A. Buford, Director

kaiser commission on medicaid and the uninsured

KEY FACTS

THE HENRY J. KAISER FAMILY FOUNDATION

May 2002

CHILDREN'S HEALTH—WHY HEALTH INSURANCE MATTERS

Health insurance coverage is key to assuring children's access to appropriate and necessary health care, including preventive services. Research demonstrates that uninsured children are more likely to lack a usual source of care, to go without needed care, and to experience worse health outcomes than children with coverage.

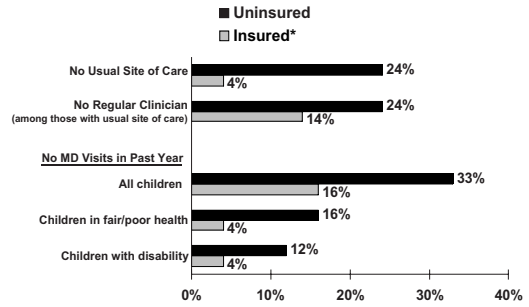
Expansions of public health insurance programs over the past decade have significantly reduced the number of uninsured children and have improved children's access to care. Medicaid and the State Children's Health Insurance Program (CHIP) have made coverage available to most children from low-income families. However, because not all eligible children have been enrolled, the full potential of these programs has yet to be realized. In 2000, over nine million children were uninsured, and nearly three-quarters of them were in low-income families (with incomes below 200% of poverty, or $30,040 for a family of three in 2002).

ACCESS TO PRIMARY CARE

Primary care services are essential to a child's wellness, and, in turn, his or her growth, development, and ability to learn. Effective primary care, providing continuous, coordinated, and comprehensive care, begins with having a regular health provider who follows the child. Uninsured children are six times more likely than insured children to lack a usual site of care (24% vs. 4%; Figure 1). Further, when uninsured children have a usual place to go to for care, a quarter still lack a regular provider at that site.

Figure 1

Children's Barriers to Primary Care, by Insurance Status



•Includes both public and private coverage.

SOURCE: Newacheck PW, et. al, 1998. "Health Insurance and Access to Primary Care for Children". NEJM 338(8):513-19.

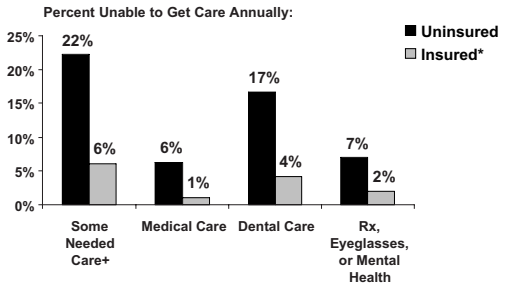
Even though children are generally healthy, they still require preventive well-child visits and are prone to minor infectious diseases that, if untreated, can lead to more serious problems. Uninsured children are far less likely than insured children to have seen a physician in the past year. This disparity persists among those who are not in good health and those who have a disability, who often need more health services (Figure 1).

UNMET HEALTH CARE NEEDS

Being uninsured increases a child's chances of an unmet health need considerably. Over 20% of uninsured children have at least one unmet need for care each year compared to 6% of insured children (Figure 2). Uninsured children are over five times more likely to have an unmet need for medical care and over three times more likely not to get a needed prescription drug. The uninsured are also much less likely to receive preventive services, including immunizations, dental, and vision care. These differences narrow only slightly when other factors that affect need, such as family income and the child's health, are taken into account.

Figure 2

Unmet Health Needs Among Children



* Includes both public and private coverage.
\+ Includes unmet need for medical care, dental care, prescription drugs, eyeglasses, or mental health.

SOURCE: Newacheck et al., 1998.

Acute Health Problems. Common childhood conditions such as sore throats, ear infections, and asthma have serious consequences if left untreated. Yet, uninsured children are at least 70% more likely than insured children to not receive medical care for such problems. They are more than twice as likely as insured children to go without care for recurring ear infections—which, if untreated, can lead to permanent hearing loss (Figure 3). Uninsured children who are injured are 30% less likely than insured children to receive medical treatment.[1]

Chronic Health Problems. Not all children are in excellent health. Parents of uninsured children are more likely to describe their child's health as less than excellent or very good compared to privately insured children (30% vs. 14%).

1450 G STREET NW, SUITE 250, WASHINGTON, DC 20005
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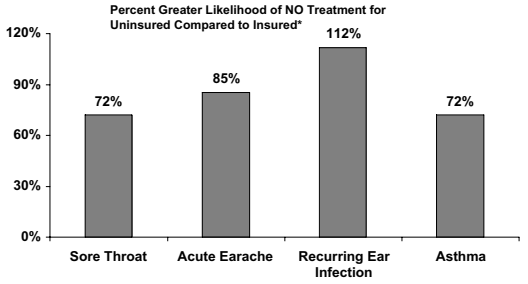
WWW.KFF.ORG

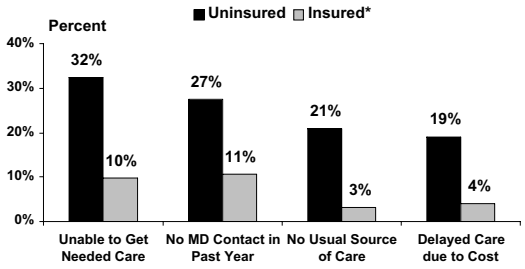
Figure 3
Chances of Uninsured Children NOT Receiving Medical Care When Sick Compared to Insured Children



* Insured Includes both public and private coverage. Odds ratios were adjusted for the effects of age, sex, family size, race/ethnicity, income, region, and urban/rural residence.
SOURCE: Stoddard JJ, et. al., 1994. "Health Insurance status and Ambulatory Care for Children". NEJM 330: 1421-25.

Nearly one in five children (18%) under the age of 18 has a special health care need because they either have or are at increased risk for a chronic condition and require services beyond that of the average child. Even though these children have increased health care needs, they still are about as likely as other children to be uninsured and to face the barriers to care caused by lack of insurance. Among children with special health needs, nearly a third of uninsured children are unable to get needed care compared to 10% of insured children. Over a fifth of uninsured children with special health needs had no physician visit in the past year and lack a usual source for care (Figure 4).

Figure 4
Unmet Health Needs Among Children with Special Health Care Needs



* Includes private and public sources of insurance..

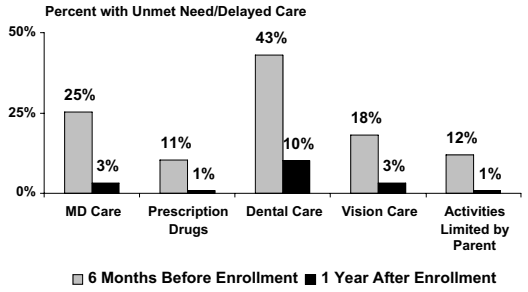
SOURCE: Newacheck et al., 1998. "Access to Health Care for Children with Special Health Care Needs". Pediatrics 105(4):760-66.

HEALTH OUTCOMES

Adequate access to primary care helps reduce preventable hospitalizations, where timely and appropriate ambulatory care could have avoided the need for hospitalization. Children's rates for preventable hospitalizations rose in the early 1990s (accounting for a third of all their hospitalizations by 1995). Uninsured children are more likely to experience avoidable stays than privately insured children. Children who do not have a primary care physician (which is more common among the uninsured) are nine times more likely to be hospitalized for a preventable problem than other types of health problems.[2]

Lack of insurance also impacts the daily activities of uninsured children. Parents who are worried about the treatment costs of accidental injuries often restrict their children, particularly teenagers, from participating in certain sports and activities like biking. In one study, 12% of uninsured children had these types of activity restrictions. However, almost all of these restrictions were removed once they gained coverage (Figure 5).

Figure 5
Changes in Access to Care
After Enrollment in a Public Program for Low-Income Children



Source: Keane, CR et.al. 1999. "The Impact of a Children's Health Insurance Program by Age". Pediatrics 104(5): 1051-58. Data from Western Pennsylvania programs 1995-96.

IMPACT OF GAINING HEALTH COVERAGE

Expansions in children's health coverage through public programs bring insurance to low-income children and help improve their access to care. A comparison of previously uninsured, low-income children before and one year after enrollment in public programs in one state showed a dramatic decrease in the share of the same children who delayed or did not get needed prescription drugs and medical, dental, and vision care (Figure 5).

Further, access to care for children in public programs is largely comparable to that of privately insured children. Access to care among children covered by Medicaid is equal to and, in some cases, better than access for privately insured low-income children.[3]

Medicaid and CHIP fill a critical void for children in our patchwork health care system. With one out of five children enrolled in Medicaid or CHIP, and more children eligible, these programs have made and will continue to make a large contribution toward covering the nation's children. This coverage clearly improves children's access to care and, thus, their health outcomes.

---

[1] Overpeck, MD and Kotch, JB. 1995. "The Effect of U.S. Children's Access to Care on Medical Attention for Injuries". AJPH, 85(3):402-404.
[2] Shi, L et al. 1999. "Patient Characteristics Associated with Hospitalizations for Ambulatory Care Sensitive Conditions in South Carolina". Southern Medical Journal 92(10):989-98.
[3] Dubay, L and GM Kenney. 2001. "Health Care Access and Use Among Low-Income Children: Who Fares Best?" Health Affairs 20(1): 112-21.
For additional free copies of this fact sheet (#4055) call (800) 656-4533.

The Kaiser Commission on Medicaid and the Uninsured was established by the Henry J. Kaiser Family Foundation to function as a policy institute and forum for analyzing health care coverage, financing and access for the low-income population and assessing options for reform. The Kaiser Family Foundation is an independent national health care philanthropy and is not associated with Kaiser Permanente or Kaiser Industries.

Promoting the Mental Health and Healthy Development of New York's Infants, Toddlers and Preschoolers: A Call to Action

Prepared by the New York City Early Childhood Mental Health Strategic Work Group

December, 2004

Promoting the Mental Health and Healthy Development of New York's Infants, Toddlers and Preschoolers: A Call to Action, was prepared by the New York City Early Childhood Mental Health Strategic Work Group, an advisory group to the New York City Department of Health and Mental Hygiene. Members include experts from the fields of early intervention, mental health, preschool special education, child care, child welfare and the judicial and academic systems. The group was convened to develop an action plan for New York City and New York State to address the mental health needs of infants, toddlers and preschoolers and their families.

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A special thanks to Ngozi Onunaku, Policy Analyst, The National Zero to Three Policy Center

Promoting the Mental Health and Healthy Development of New York's Infants, Toddlers and Preschoolers: A Call to Action

> **"Early childhood mental health is the capacity of the child from birth to age five to experience, regulate and express emotions; form close and secure interpersonal relationships; and explore the environment and learn. Infant mental health refers to how these issues affect development in the first three years of life. Early childhood mental health is synonymous with healthy social and emotional development."** ***(Zero to Three Policy Center Fact Sheet, May 18, 2004)***

Why Early Childhood Mental Health Is Important: A Scientific Overview

Accumulated research over sixty years (beginning with Spitz, 1945) indicates that early disruptions in emotional development and relationships can have long-standing negative consequences (National Research Council/Institute of Medicine, 2000; Knitzer, 2000). Mental health problems affect children from birth and are influenced by individual genetic factors as well as environmental factors.

The Impact of Early Experiences on Mental Health

Early experiences have a formative influence on emotional as well as cognitive competence. For instance, high levels of stress in the early years can impair brain development (Shore, 1997). Likewise, the quality of a young child's early experiences largely determines the formation and pruning of the brain's synapses, a complex process that enables the young child to acquire information and make sense of the world in which he or she lives. (Nelson & Bosquet, 2000); (Shonkoff & Phillips, 2000). Maternal depression provides another example of the impact of early experiences on an infant's emotional and cognitive development. Research has shown that infants exposed to maternal depression during the sensitive period of frontal lobe development (6 to 18 months) often display patterns of frontal lobe functioning characteristic of depressed adults (Dawson, Hessl, & Frey, 1994). Infants and young children can experience difficulties related to emotions such as sadness, anxiety, fear, and angry behavior (Shonkoff & Phillips, 2000).

The Impact of Attachment on Early Childhood Mental Health

"Healthy development depends on the quality and reliability of a young child's relationships with the important people in his or her life, both within and outside the family. The development of the brain's architecture depends on the establishment of these relationships" (National Scientific Council on the Developing Child, 2004). The biological propensity for attachment provides an opportunity for an infant to form a close, positive emotional relationship with an adult, allowing infants and toddlers to develop security, confidence, and trust with their caregivers (Shonkoff & Phillips, 2000). This relationship helps the young child explore his or her environment with confidence and manage stress (Ainsworth, 1967; Emde, 1980; Emde and Easterbrooks, 1985; Gunnar, 2000; Gunnar et al., 1996). On the other hand, insecure attachment to the primary caregiver in infancy can lead to poor emotional control, limited social skills, and a decreased capacity for play in school age children (Zeanah, Mammen, & Lieberman, 1993). The impact of caregiving interactions can at its best be productive and adaptive or at its worst be destructive and maladaptive to the young child's development.

The younger or more vulnerable a child, the more important it is to consider the primary relationships which hold that child. "Infants' physical existence is tied to the care provided by other human beings. The same can be said for their psychological existence, it follows from this that the treatment of infants (and young children) must also be relationship oriented" (Sameroff, McDonough, and Rosenblum, 2004, p. 5).

Additional Risk Factors for Poor Early Childhood Mental Health

In cumulative fashion, the presence of more than one risk factor, such as trauma, parental substance abuse, poor childcare, single parent household, homelessness and mental illness or mental retardation of the parent greatly increases the likelihood of later problems in life (Sameroff, Seifer, et al., 1987; Sameroff, Seifer, et al., 1993). For instance, poverty, with its concomitant exposure to environmental and/or biological risks, places the young child in particular vulnerability to such outcomes as school failure, disproportionate use of special education, delinquency, under employment and mental illness (Knitzer, 2000). In the most recent U. S. Census (2000), 24% of infants and toddlers were living below the poverty level. In New York City, 30% of infants, toddlers and preschoolers (ages birth through 5) are growing up in poverty. In regard to the connection between mental health issues and poverty, a 2004 report by the New York City Department of Health and Mental Hygiene, entitled "Health Disparities in NYC", indicates that; "mental health problems are more common among poorer New Yorkers than wealthier New Yorkers, those with the lowest income levels are 2 to 6 times more likely to experience serious emotional distress than those with the highest incomes." (Fund for Public Health in New York, Inc., 2004).

Environmental Influence on Early Childhood Mental Health

The neural plasticity of the developing brain is affected by both deleterious and beneficial (e.g., enriched environment) experiences (Nelson, 2000). The availability of early childhood mental health services can bolster the environmental supports that promote healthy children and nurturing families. It has both a preventive and remedial function. Such interventions as the Abecedarian Project (Campbell & Ramey, 1994), High/Scope Project (Schweinhart, Barnes, and Weikart, 1993) and the Syracuse Project (Honig & Lally, 1982) demonstrate the positive long-term consequences of early developmental intervention on adult outcomes (e.g., school graduation, income level, decreased criminal behavior).

Diagnosis, Assessment and Prevalence of Mental Health Problems in Children Under the Age of Five

Studies have demonstrated high prevalence rates of mental health problems in children under five, reaching as high as 21% overall and as high as 9% for serious mental health problems for which emergency services and/or inpatient hospital care might be indicated (Lavigne et al., 1996). Recent reviews of the literature substantiate that most psychiatric disorders that afflict school-age children can be found in children below the age of five, and that there are several additional disorders that may be specific to the early childhood period (Task Force on Research Diagnostic Criteria: Infancy and Preschool, 2003). Diagnostic criteria and assessment methods, developmentally appropriate for young children, exist and function to pinpoint early emotional difficulties. These facts suggest that mental health professionals treating children and adolescents have an obligation to evaluate and treat children under five. However, most mental health professionals are not trained to do this effectively. For a more detailed review of the current research, please refer to Addendum A.

The Impact of Mental Health Problems on School Readiness

Other likely indicators of mental health problems are behavioral disturbances in preschool settings. In one recent national survey of over 3,000 teachers, 30% of the kindergarten teachers reported that at least half of the children in their class lacked academic skills, had difficulty following directions and working as part of a group, and 20% reported that at least half the class had problems with social skills (Rimm-Kaufman, Pianta & Cox, 2000), (Raver, 2000, p.3). While one could imagine many pathways to such problems, one important longitudinal study examining the predictive relations between assessments in infancy and parent and teacher reported problems at age 7, reported that 83% of the children identified by teachers as highly externalizing had already been observed to display markedly disturbed or disorganized attachment behavior with their primary caregivers in infancy and were below the national mean in mental development at 18 months, compared with the 13% of non-externalizing children (Lyons ,Easterbrooks,Cibelli,1997). This latter study supports the importance of

early mental health assessment and treatment together with developmental help for many children and their caregivers much earlier than professionals had envisioned.

The fact that such a large percentage of children who enter elementary schools already have significant mental health challenges is a major contributor to the challenges which the New York City school system faces. Educational approaches by themselves are not sufficient for children with social-emotional issues. Indeed, "the elements of early intervention programs that enhance social and emotional development are just as important as the components that enhance linguistic and cognitive competence. Some of the strongest long-term impacts of successful intervention have been documented in the domains of social adjustment, such as reductions in criminal behavior" (National Research Council/Institute of Mental Health, 2000, p.11).

For examples of manifestations of mental health problems in infants, toddlers and preschoolers, please refer to Addendum B.

Opportunities and Gaps in Existing Service Delivery

Governmental systems are not currently meeting the needs of New York City's youngest children and their families, despite substantial compelling scientific evidence that supports the efficacy of mental health treatment. Almost no public monies are specifically allocated to address the mental health needs of this population and significant numbers of very young children exhibit severe behavioral and emotional problems. Numerous service structures outlined below are in place that can be built upon to allow New York City to mobilize a dedicated service system for infants, toddlers, preschoolers and their families.

- **Licensed mental health clinics** provide a strong opportunity to reach young children in need of mental health intervention, since the N.Y. State license to operate no longer limits access to children aged six and older. As in the case of all children, Medicaid reimbursement for mental health services is permitted when the child has a mental health diagnosis.

However, as currently designed, two significant obstacles prevent licensed mental health clinics from serving the mental health needs of these children. First, a complex structure at the State level relating to rates of Medicaid reimbursement and limits on levels of service forces clinics that wish to increase capacity to serve children under five to decrease capacity to serve children of other ages, (a New York State concept known as "Medicaid neutrality"). The second obstacle inhibiting licensed clinics (and numerous other existing service structures) that might otherwise be expanded upon to create the hoped for comprehensive model, relates to the issue of trained professional staff. Most clinical graduate schools (across disciplines) fail to train their students on the relational perspective essential for working with children under five and their

parents, and do not impart the expertise necessary to recognize and treat emotional disturbance in very young children. Therefore, even if a clinic makes the choice to shift its target population from older to younger children, it will likely have difficulty locating professionally qualified and culturally competent staff.

- **The Part C Early Intervention Program, (EI)** provides another viable pathway to meet the mental health needs of some very young children, a system exclusively available to children under age three with developmental delays and disabilities, (e.g. mental retardation, autism, physical disabilities, etc.). As a federally, state and city funded program, numerous interventions are potentially available to eligible children and families within this category including family training, support groups, psychological counseling and family counseling.

However, in addition to the limitation of access to services only to children under age three with delays and disabilities; (e.g.., mental retardation, autism, physical disabilities, speech delays, etc.), little attention is typically placed on the mental health of children involved in this program. Despite the substantial scientific evidence asserting that the quality of the infant-parent relationship is the young child's most important influence, there is no systems expectation that evaluators assess or treat the emotional quality of the child-parent relationship. Additionally, lack of professional expertise in assessment and intervention relating to the social-emotional development of infants and young children further limits access to mental health services for otherwise eligible children within the EI system.

- **The Committee on Preschool Special Education (CPSE)** provides a continuum of services for children between the ages of three and five who exhibit a significant delay or disability in one or more functional areas including cognitive, language and communicative, adaptive, socio-emotional or motor development, if it interferes with a child's ability to learn. Children eligible for CPSE services are entitled to an individualized education program tailored to their specific needs.

While there might be opportunities for children with behavioral and emotional issues to receive services through CPSE, service plans center on service delivery within the context of a school placement and seldom give attention to the emotional life of the child and/or the parent-child relationship. Although the law allows for parents to receive counseling and training through CPSE, such service is rarely a recommendation of the committee. When it is a recommended intervention, the work focuses on how social-emotional issues affect the child's ability to learn academically and not on his/her overall mental health. In addition, ongoing consultation to help teachers provide supportive interventions for children with social-emotional problems is rarely provided. These omissions seriously limit the impact of CPSE services for children with mental health problems and leave children vulnerable to future academic failure. Furthermore, there are very few preschool special education programs

that address the needs of children with significant emotional difficulties. For example, in all boroughs of the city, there are only 6 therapeutic nurseries available to serve preschool children.

- **Preventive Services** that are provided to families in which children are at high risk for abuse and neglect offer a vital potential vehicle for delivering mental health services to very young children and families. To be effective in fulfilling their mission of protecting children from harm while avoiding foster care placement, such programs invariably encounter the negative sequelae of parental mental illness, substance abuse, and domestic and community violence upon children. In this context, the prevalence of emotional disturbance in young children is very high. The home visits and monitoring required in preventive programs can be used in the service of delivering mental health intervention.

However, current citywide standards in staffing preventive programs do not require professional level staff, and a bachelor's degree in any major discipline satisfies the established criteria for working in a preventive program. Despite good intentions, most preventive staff lack expertise in meeting the mental health needs of young children and families. Additionally, within the preventive strategy of most programs, the best practice model of combined intervention with parent and child together is rarely understood as a vehicle for supporting parental sobriety, encouraging parental compliance with treatment for mental illness or violent behavior, and for resolving the failures in empathy that lead to abuse of a child. As in the other aforementioned existing venues, well-trained clinical staff can help transform these programs into effective components of a comprehensive model of mental health care for young children and their families.

- **Foster Care** placement is a necessary option for some of NYC's most vulnerable children, with New York City currently having over 6,000 under the age five (F. Wulczyn, B. Harden, Hislop,K., 2002). These children, perhaps more than any other group, are in urgent need of mental health intervention, and the foster care system can incorporate extensive mental health services for this needy group. Young children remain in foster care longer than their older counterparts, and re-enter foster care placement after being returned to their families in significant numbers. Over half suffer from chronic health problems such as asthma and over half experience developmental delays, at a rate 4-5 times that of the general population. Chronic health problems have an established association with mental health difficulties, and all young children in foster care face a greatly heightened risk of emotional and behavioral problems. All have suffered a traumatic blow to their developing trust in others and to their ability to develop secure attachments. The phenomenon of moving from foster home to foster home can deeply damage the young child's ability to form attachments and manage emotions. Several studies of the mental

health needs of young children in foster care reveal that over one-third require clinical intervention and all require some mental health support. (Dicker,S., Gordon, E., and Knitzer,J.,2001), (Silver,J.,Amster, B, and Haecker, T, l999). Recent new federal law requires a referral to Part C for children under the age of 3 with substantiated cases of abuse and neglect.

Currently there are insufficient resources and expertise to meet the significant need for mental health services for young children in foster care.

- **Primary health care settings** are an obvious and important venue to provide early childhood mental health services in a non-stigmatized normative environment. Particularly with the advent of Child Health Plus which has expanded access to health care for children, most young children do visit a primary health care provider for immunizations and wellness care. Therefore, this system offers a powerful opportunity within a comprehensive model of care.

However, few pediatricians and primary health care providers routinely screen for emotional problems in young children, or assess the quality of the relationship of the parent and child, a primary influence upon the child's mental health. Again, issues of training and orientation, as well as the time constraints faced by most physicians who serve young children, present obstacles to achieving this goal. Additionally, most primary health care providers lack training in the cultural competence necessary to understand the young child in his family, an enormous disadvantage in a city as culturally diverse as New York.

- **Early Childhood Care and Education Programs** such as Head Start, Early Head Start, Child Care and Universal Pre-Kindergarten have the potential for providing excellent supports for young children's social-emotional growth and reducing the incidence of later mental health problems. With approximately 200,000 children in New York City spending most of their waking hours in early child care (Citizen's Committee for Children of New York, 2002), these programs provide an important opportunity to achieve ongoing mental wellness by attending to the critical elements that support the social-emotional well being of young children.

Unfortunately, many early childhood teachers lack the knowledge and ongoing support needed to create early childhood programs that promote preschoolers' mental health. Early childhood mental health consultation could greatly increase preschool teachers' ability to provide strong supports for children's social-emotional development through everyday play and learning experiences, positive relationships between teachers and children, and more individualized interventions with parents and children. Currently, most early childhood

programs have little or no access to early childhood consultants, leaving teachers to struggle with behavior problems and concerns about individual children's mental health. A significant expansion of early childhood mental health consultation could transform early childhood programs in the city and state into settings that make a major contribution to children's mental health in the preschool years and beyond.

Call to Action

There is no system in place in New York to identify young children at significant risk for mental health problems. The following are key mental health services that should be part of a comprehensive service delivery system for children under the age of five and their families:

- Screening and Assessment
- Family-Based Mental Health Services
- Home-Visiting
- Outpatient Mental Health Clinics
- Preschool-Based Mental Health Services
- Early Intervention Services
- Therapeutic Day Treatment Settings
- Intensive/Residential Treatment
- Health System Based Mental Health Services
- Case-Management
- Respite
- Resource and Referral Services
- Mental Health Consultation (e.g., available to child care staff, Part C Early Intervention professionals)

These services would constitute the core of a comprehensive early childhood mental health system that would provide a continuum of services for infants, toddlers, preschoolers and their families. Services and supports would focus on promotion and maintenance of social-emotional well-being, prevention and intervention as defined below:

Promotion and maintenance of social-emotional well-being in young children requires a universal approach directed at pregnant women, fathers to be and all young children and their families. This involves building awareness on the part of parents and other primary caregivers (e.g. child care and health care providers) about the key role they play in creating and maintaining healthy relationships, environments, and experiences that allow children to grow and prosper.

Prevention services are typically directed at a narrower population of young children and families experiencing, or at high risk of experiencing, situations that might lead to disruptions in social-emotional development. Such services are provided through home visiting programs, Early Head Start, and child abuse prevention programs, to name a few. Staff in these settings are trained to take

advantage of protective factors that can mitigate against some of the risks these children face and identify those children who need to be referred to more intensive services.

Intervention services are highly targeted and individualized to a specific child and family, and require staff with advanced degrees. Such services include therapeutic day care programs, infant-parent psychotherapy, and other services where the relationship between the child and important attachment figures becomes the focus of intervention.

For a more detailed description of these services, please refer to Addendum C.

The challenge for New York is to look critically at our existing systems of care to find ways to enhance the optimal mental health and development of our youngest children and their families. New York must develop a comprehensive, cross system plan to promote overall early childhood mental health wellness, effectively prevent emotional and social illness, and provide targeted treatment for children and their families displaying mental health problems, This may require a paradigm shift, to recognize that mental health is the responsibility of not one discrete intervention system but the responsibility of all child and family serving agencies and systems.

As has been emphasized by the above descriptions, a well-functioning comprehensive mental health system for New York's youngest children and their families will depend on well-trained culturally competent staff. Incentives need to be developed to encourage all professional schools preparing staff to work in programs that touch the lives of young children and their families (such as medicine, education, speech and language therapy, occupational and physical therapy, psychology and social work) to extend their curricula to include emotional development in young children as well as impart the skills to assess and intervene with both parents and their young children. All programs that serve young children must provide ongoing in-service training and reflective supervision as integral aspects of program. As is clear from the described opportunities and gaps, without such training requirements, a viable comprehensive system of mental health care for young children will not be possible. Mental health service delivery should take place in various settings: child care settings, stand-alone clinics, in the home, etc. Interweaving it within child and family settings will help reach the majority of children and parents. Given the critical impact of relationships on virtually all aspects of the development of young children, it is imperative that interventions be relationship based.

Other states such as Louisiana, Michigan, Florida, Arizona and Wisconsin have developed statewide strategic plans to address the mental health needs of young children and their families. As an example of what other states are doing, Florida

piloted the Infant and Young Children's Mental Health Pilot in the Miami-Dade Juvenile Court to address the well being of infants, toddlers and their families who come to the attention of the court. In this court, all infants, toddlers and their mothers are screened and assessed. Babies are also screened for developmental delays and referred for services where indicated. Parent-infant psychotherapy is offered to a select group of mothers. An Early Head Start program focusing on children who are victims of abuse or neglect was designed. Three years of data in Miami-Dade Juvenile Court show substantial gains in improving parent sensitivity, child and parent interaction. Children showed significant improvements in enthusiasm, persistence, positive affect and a reduction in depression, anger withdrawal and irritability (Lederman,2003). Of the families selected to receive the intervention; 58% improved in their developmental functioning (Adams, Osofsky, Hammer, Graham, 2003), 100% of infants were reunified with their families and reports of abuse and neglect were reduced from 97% to 0 (Lederman, 2003). Improved outcomes for children and families is not just pie in the sky. Mental Health Interventions with infants, toddlers, preschooler and their families can have significant impact and outcomes.

There is a need for strong leadership in developing a comprehensive model of care in New York City and to develop a statewide strategy to respond to the needs of young children and their families across systems. The New York City Early Childhood Mental Health Strategic Workgroup stands ready to assist in the selection of priorities and plans as New York begins to build the continuum of mental health care which is both needed and filled with evidence-based promise for young children and their families in New York.

Addendum A

Current Research on the Diagnosis and Assessment of Mental Health Problems in Children Under the Age of Five

Diagnostic classification of distressing and functionally impairing symptoms and behaviors that mark mental health problems in early childhood is an area of active and ongoing research (DelCarmen-Wiggins and Carter, 2004). While several assessment measures are in still in development, one example of a promising clinician-administered measure appropriate for psychiatric diagnostic evaluation of preschool-age children that is currently used at multiple sites nationally is the Preschool Age Psychiatric Assessment (PAPA). The PAPA is a structured interview administered to caregivers with possibility for supplementation by additional informants (Egger and Angold, 2004). This measure, a developmentally modified version of a well-established, reliable, and valid measure of psychiatric diagnosis of school-age children the Child and Adolescent Psychiatric Assessment (CAPA), has itself been shown to be a reliable, valid measure for the study of psychiatric diagnosis of children ages 2-5 years, using the DSM-IV classification. It is also being used to test an alternative diagnostic system specific to very young children the Diagnostic Classification: Zero-to-Three-Revised (Egger et al., 2004). In a large-scale prospective epidemiologic study using this measure for diagnosis of DSM-IV disorders in a carefully sampled cohort of 2-5-year-old children from primary care settings across diverse regions of North Carolina, researchers found that the point-prevalence (17.4%) and lifetime prevalence (32.4%) rates, patterns of comorbidity, and distribution of psychiatric disorders, the latter with several exceptions, were quite similar to those of the school-age population (Angold et al., 2004). This study and a recently published meta-analysis of epidemiologic studies using a variety of methods to assess individual disorders affecting children under five (Task Force on Research Diagnostic Criteria: Infancy and Preschool, 2003) support that, even within the DSM-IV classification system, with all of its limitations, many of the psychiatric disorders that afflict school-age children can be validated and reliably diagnosed in children down to the age of two and three. That being said, there are disorders such as feeding disorder of infancy that may well be specific to the infant, toddler, and preschool periods (Task Force on Research Diagnostic Criteria: Infancy and Preschool, 2003).

Furthermore, developmentally and relationally-informed clinicians evaluating very young children, even infants (Gilliam and Mayes, 2004) who suffer from significant distress and impairment in the social-emotional domain, and including those who may not be easily classifiable or meeting threshold criteria in the DSM-IV system, can often perceive behavioral and emotional problems that are likely to predict later psychiatric disorders. Ideally, comprehensive mental health assessment should therefore include, in addition to informant reports, clinically, developmentally, and relationally informed observations of non-verbal and, to the

extent possible, verbal behavior by a mental health professional who is appropriately trained to assess children, caregivers, and caregiver-child relationships from birth to five in various settings (i.e. clinic, home, anddaycare/preschool) (Zeanah et al., 2000).

Addendum B

What Mental Health Problems in Young Children Might Look Like

The following examples are categorized from least severe early childhood mental health issues to most severe. They provide a brief overview of how mental health issues in very young might present themselves.

Mild (Adjustment disorders and exaggerated response to developmental changes with a stable relationship between the two dyadic partners)
1. Infant: 7-month-old baby whose mother lost her cleaning job downtown after 9/11 and is now very attached to her mother becomes inconsolable when mother tries to leave her with a babysitter in an effort to look for a new job. Mother is becoming frustrated.
2. Toddler: 20-month-old girl who successfully had slept through the night prior to her baby brother's birth, now insists on mother falling asleep with her in the bed. Child scared mother when she threw a doll at the baby and nearly hit the baby in the eye
3. Preschooler: 3-year-old boy's dog runs away after a recent move. Child has nightmares and ends up in his mother and father's bed. At parent-teacher night, his new preschool teacher tells the mother that her son often does not listen to her during class and that he has frequent trouble sharing toys with other children. His mother is concerned since she did not hear similar complaints form his prior preschool.

Moderate (Anxiety, mood, behavioral and communication disturbances involving mild to moderate disturbance)
1. Infant: Premature infant of 6-months with a history of intubation has difficulty transitioning to solids. Caregiver, who comes from poor, rural immigrant family in which she had experienced physical abuse, begins to try to force baby to eat, leading to daily battles, increased spitting up, and maternal anxiety about baby's health and predictions that baby will grow up to be willful and manipulative
2. Toddler: 2-year-old boy's father is severely injured in a car-accident, mother becomes distraught and preoccupied. Child has increased separation anxiety, nightmares, and fears of monsters and body disintegrity. Child fails to progress in toilet-training that had started.
3. Preschooler: 4-year-old girl with a lisp who lives in a family with increasing marital tension has marked social anxiety and will only speak in a whisper to one teacher and her parents when in public. Mother states that she has been very bossy and rude at home.

Severe (Anxiety, mood, communication, pervasive developmental, and psychotic disturbances involving moderate to severe disturbances in both dyadic partners)

1. Infant: 4-month-old infant appears very serious and irritable with mom who makes little effort to look at baby and reports that she is so depressed, she has thought of trying to kill herself again since finding out her husband is having an affair. Baby is said to be unconsolable to the point of vomiting during the night for no clear medical reason.
2. Toddler: 2-year-old girl has such severe separation anxiety that her mother cannot use the bathroom in privacy. Mother says that this child has uncontrollable tantrums involving pulling out her hair and banging her head so hard against the floor that she has knots on her scalp. Child will approach strangers on the subway and hold their hands. Mother has a history of prior ACS reports and an extensive trauma history involving foster care herself.
3. Preschooler: 3-year-old girl noted by her daycare program to be humping stuffed animals, and involving boys in her class to do what she calls a "sexy dance" during which she pulls down their pants. Previously toilet trained, she has started to wet herself and has begun to talk like a baby as if she were a different person. Stepfather has been seen to kiss the child on her mouth when saying good-bye.
4. Infant: Brought to ER with altered mental status following unexplained skull fracture, found on exam at 8 weeks to be only a few ounces above birthweight. Mother, who has past history of psychiatric hospitalization for unknown reasons, appears very worried and states that an evil spirit has entered her baby's body.
5. Toddler: 18-month-old boy, poorly related, no expressive language, no pointing or sharing, with flapping and twirling and odd sounds is brought in by his mother who states that there is nothing wrong with him except that he puts small objects in his mouth. Mother appears to be intoxicated, stating that she takes opiate painkillers for fibromyalgia.
6. Preschooler: 4-year-old boy is thrown out of nursery school for breaking a little girl's nose with a baseball bat after cursing her out. Some days so tired, he falls asleep at his table in the preschool or appears to be in a daze, he has been at other times seen to hit, kick, and bite children, scratched a teacher's hand, and was reported to be cruel to a kitten who he hurled into traffic by the tail. Mother has been seen to wear dark glasses indoors and was recently in an arm cast.

A comprehensive early childhood mental health system focused on preventing, screening, assessing and treating the mental health needs of young children and their families can help foster healthy development and would make a major difference in outcomes for children at all three levels.

Addendum C

Sample Components of a Comprehensive Early Childhood Mental Health System

The following is an outline of key mental health services that should be part of a comprehensive system for children age five and under:

Screening and Assessment

Depending on child and family needs, screening or full assessment would include a focus on social-emotional functioning and other domains that affect mental health (e.g., cognitive development, language, and physical/constitutional domains) and observations in different natural settings, for example, interactions with parents, interactions at home, or in play at preschool.

Family-Based Mental Health Services, including:

- Individual child therapy
- Parent-child therapy (or caregiver-child therapy)
- Family-Based Mental Health Services
- Family therapy
- Child-centered parenting therapy or parent guidance
- Preschool-Based Mental Health
- Therapeutic Day Treatment Settings

Family-focused mental health services aim to improve the developmental and emotional functioning of young children and their families and build the capacity of parents and caregivers to support the well-being and development of their young children. These services should be available to families in a variety of community settings, including hospitals, community mental health clinics, early childhood and preschool programs, other human service settings, and at home.

Home-Visiting

Home-visiting could include the provision of family-based mental health services (listed above) when parents need these delivered at home, as well as preventive-based parenting support for high-risk families (e.g., mothers at high-risk of post-partum depression).

Outpatient Mental Health Clinics

Licensed Outpatient Mental Health Clinics that treat children and adolescents need to develop the capacity and skilled staff to serve infants, toddlers, and their families both through individual as well as family-focused, relationship-based interventions. Services should include assessment, diagnosis, and intervention with liaison to social work and case managers, adult mental health and substance abuse services, and mobile crisis teams and other emergency services when appropriate. Mental health practitioners require additional training in the evaluation and treatment of very young children as well as awareness of relevant community resources.

Preschool-Based Mental Health Services, including:

- Early Childhood Mental Health Consultation -- This service would help program staff in early childhood programs working with children ages birth through 5 years (Head Start, Early Head Start, child care, daycare, preschools and pre-kindergarten) create strong supports for children's social-emotional development and address the mental health needs of particular children. Consultants work with staff to ensure that classroom activities and routines, adult-child relationships, and play with peers provide experiences that promote children's social-emotional growth. Consultants may also work with both parents and teachers to design individualized supports for particular children and sometimes provide direct interventions with children. (Early childhood mental health consultants with appropriate expertise might be psychologists, or social workers.)
- Preschool as refuge/therapeutic milieu (Garbarino, Dubrow, et al., 1992; Koplow, 2002)
- Early childhood group therapy (Halpern, E., Lamb-Parker, F., et al., 2003; Shahmoon-Shanok, 2000)
- Child guidance groups and individualized interventions for parents

Part C Early Intervention Services

- The Part C Early Intervention Program, (EI), with a family-focused perspective, offers a key opportunity to address the mental health needs of infants, toddlers and preschoolers under age three with developmental delays and disabilities, (e.g. mental retardation, autism, physical disabilities, etc.). Numerous interventions are potentially available to eligible children and families within this category including family training, support groups, psychological counseling and family counseling. Early Intervention offers the potential to assess and treat infants, toddlers, preschoolers and their families and to provide relationship based interventions for eligible children. Assessment and intervention should focus on the social-emotional development of the young child and assess and treat the emotional quality of the child-parent relationship.

Therapeutic Day Treatment Settings

- Therapeutic preschools
- Therapeutic parent-child programs (e.g., providing half to full-day programs at least a few times a week)

Intensive/Residential Treatment, including:

- Residential treatment for parents and children
- Family based treatment

Health System Based Mental Health Services

Primary care settings provide an important venue for prevention, problem-identification, and intervention with at-risk infants, toddlers, preschoolers, and their families. On-site mental health consultants who are appropriately trained to assess, diagnose, and treat very young children can become an important component of a comprehensive model of care for child and caregivers, many of whom would not otherwise receive attention to their pressing social-emotional needs. Such consult-liaison mental health professionals can assist primary care clinicians in triaging cases to specialized mental health care when indicated. This integration of services can also reduce unnecessary and costly outpatient and emergency medical visits that have a social-emotional basis.

Case-Management

Case-management for families receiving other mental health services would aim to help families (including foster care parents) secure other supports necessary for effective use of mental health interventions and for reduction of significant risks to child well-being (e.g., assisting families' access to primary health care or housing assistance).

Respite

Respite is "relief" for a parent or caregiver from caring for an individual with a disability, special need, chronic illness, etc. Respite can be in the form of a trained paid caregiver who comes to the child's home from an agency or organization that is contracted to provide respite services; it can be in the form of out-of-home respite care, where a child might be brought to a contracted home or agency to be looked after: or it can be in the form of reimbursements to the family to pay for a caregiver they have identified to look after the child for short periods of time. Respite is designed to "relieve" the caregiver for periods of time so that they may take care of other members of the family, get out of the house to run errands or do something recreational, and in some cases, even take short vacations or the like.

Resource and Referral Services

Resource and referral services provide information about available mental health services (e.g., how to obtain an evaluation, how to find a type of therapy or consultation) to parents, early childhood professionals, health providers and others working with children and families.

Mental Health Consultation (e.g. available to child care staff, Part C Early Intervention professionals)

Early Childhood Mental Health Consultation would help program staff in early childhood programs working with children ages birth through five years (Head Start, Early Head Start, child care, daycare, preschools and pre-kindergarten) create strong supports for children's social-emotional development and address the mental health needs of particular children. Consultants would work with staff to ensure that classroom activities and routines, adult-child relationships, and play with peers provide experiences that promote children's social-emotional growth. Consultants may also work with both parents and teachers to design individualized supports for particular children and sometimes provide direct interventions with children. (Early childhood mental health consultants with appropriate expertise might be psychologists, or social workers.)

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Tips on What to Consider When Compiling Data

To increase the credibility of your group and issue:

- Use reliable data sources
- Cite data sources
- Interpret the data within appropriate boundaries
- Be clear about what the data do *not* say
- Use comparisons to help put the data or issue in context for your listeners and audience
- Keep it professional

Always note data sources:

- Use citations for data sources as footnotes or within the fact sheet
- If data are from a website, indicate web site address and date of retrieval
- Mention governmental source or non partisan, nonprofit data source and be clear on what type of data source you used
- When possible, mention if a government source or well-recognized local organization (e.g., United Way) utilized the same data in a recent report

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Tips on What to Consider When Examining New Issues

Strategies to help examine issues that may be a relatively new phenomena – Global scan to community level:

- List information your group knows about the issue
- List information your group knows about the system
- Outline what your community has by way of these services
- Consider whether these services are meeting best practices
- Identify all other information your group knows about the issue

Questions to consider regarding Infant Mental Health:

- Who refers parent/infant dyad?
- What assessments are utilized for parent/infant dyad?
- What is the duration of infant mental health services?
- Commute to services from our community?
- Which agency pays for the services?
- What qualifications do infant mental health professionals have? Any license?
- Are there different levels of care?