

The power of narrative strategy to achieve health equity: Harnessing CBPR to support grassroots community organizing



Important Definitions*

Dominant Narrative: Ideas or stories about how the world works that are held by many people and live in our heads, even if we are unaware of them.

Counter Narrative: Narratives that challenge the dominant narrative, identify alternative values, and a new vision of what is possible.

Narrative Power: The ability to influence worldviews by shifting narratives.

Project Overview

In a collaboration between researchers at the University of Minnesota and the Collaborative on Media & Messaging for Health and Social Policy (COMM HSP) and Center for Health Progress (CHP), the objective of this community-based participatory research project is to deepen understanding of how a community-based, power-building organization can leverage narrative strategy to counter dominant, mainstream narratives about the U.S. healthcare system, and shift individual attitudes and beliefs about how the current system does or does not advance health and racial equity.

Underlying this work are **three goals**, accomplished using a mixed-methods research protocol detailed in the next section:

- Identify powerful messages about the harms of the healthcare system and a vision for a transformed system that puts people first.
- Package these message "ingredients" in a way that is simple to understand & follows the general race-class narrative approach to building narrative power in which CHP leaders are trained.
- **Develop & implement a survey** that compares the effects of organizer-created narratives compared to the "dominant narrative", using survey outcomes identified by the organizing team as important.

Process and Methods

Guided by the community-based participatory research framework, the first stage of the project was to establish **mutual understanding, guiding principles**, and **shared values** between CHP and COMM HSP. This involved meeting every few weeks at the beginning of the project to share information about our mutual goals and values, communication research approaches (COMM HSP), and organizing practice and leadership and narrative trainings (CHP).

This process led us to identify a shared research objective of advancing evidence of strategies to build narrative power for community leaders and transform stories into shared motivation for action. To do so, we developed a mixed-methods research protocol. The protocol consists of 4 phases, detailed in the following table.

Throughout the development of the research protocol, the COMM HSP team and CHP staff (particularly Marissa Hallo, Senior Communicators Organizer at CHP) met regularly with 7–10 **community leaders****Marissa organizes on the "communications team." The leaders are a diverse group of community members in Colorado, aligned around a shared goal of transforming the health care system to be oriented toward people, not profit.

^{*} For more definitions of narrative and narrative power in the context of health, see County Health Rankings & Roadmaps, Narratives for Health, at: https://www.countyhealthrankings.org/strategies-and-solutions/narratives-for-health

^{**} learn more about community leaders on the next page

Phase I: Qualitative interviews with CHP leaders May—June 2023

The first phase consisted of hour-long, semi-structured Zoom interviews with **community leaders*** from the CHP Comms Organizing Team (N=7). Interviews covered topics related to leaders' lived experiences and their attitudes about and vision for health care.

The interview guide was developed in collaboration with CHP and covered three main areas: **1) leaders'** background and motivation for organizing with CHP; **2) perception of challenges** in the existing health care system, including specific experiences; and **3) vision for a more equitable, community-centered system.**

Phase II: Identify key themes and outcomes of interest from interviews for a survey experiment June-Aug.~2023

In this phase, interview transcripts from Phase I were analyzed to identify emergent themes and potential outcomes of interest to address in Phase III.

We created a list of themes about challenges with the health care system and visions of a transformed system and also identified specific examples of real words used by the leaders to capture their voices within each thematic area. Leaders' reactions to these themes were then used to develop the narratives that would be tested, and their ranking and prioritization of outcomes of interest to their organizing strategy were used to identify the measures that would be included in a survey experiment.

Phase III: Quantitative survey experiment testing narrative elements and outcomes Sept. 2023–March 2024

In the third phase, we fielded two online survey experiments conducted in Prolific pilot test (N=900) and full experiment (N=4800) that **tested the effects of different narrative elements on individuals' collective action intentions and causal and responsibility attributions** for the problems of unaffordability and complexity in the health care system, among other exploratory cognitive and affective outcomes.

The narrative stimuli and survey measures were developed through an iterative process with CHP that included multiple rounds of feedback from CHP staff and leaders.

Phase IV: Focus group communication of results with CHP leaders $July\ 2024$

In the last phase, we convened a Zoom meeting with CHP leaders and staff organizers to understand **how** findings from the survey experiment may impact and advance their ongoing organizing work.

Specific objectives of the session were to: 1) share findings and help leaders see which aspects of their narratives are most effective in meeting organizing outcomes; and 2) learn how CHP can directly implement findings to inform future campaign work and narrative strategy.

To Learn about our Findings:

Join us on Monday, October 28, from 2:30 to 4:00pm

Session Title: Crafting Messages and Narrative for Health Policy Advocacy

Presentation Title: Participatory research to advance narrative strategy: Results from survey research

to support community organizing for health justice (Medero et al.)

Location: Minneapolis Convention Center, 103B2

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About Center for Health Progress (CHP)

CHP is a member-led organization that builds power among poor, working, and middle class people of all races across Colorado who have a shared stake in taking on the greedy corporations and executives who've rigged our healthcare system, bankrupted our families, and bought the votes of our elected officials. CHP develops grassroots leaders who are winning campaigns and policies that limit corporate power and strengthen government oversight. The organization focuses its leadership and resources on three key change efforts—power building, health care system redesign, and narrative building—to accomplish this aim.

A core aspect of CHP's power building effort is building power among base member leaders ("community leaders") who represent working class, immigrant, and BIPOC communities, and marginalized healthcare workers (without institutional power). These community leaders receive deep investments in their leadership and support for their involvement in CHP's work, including through a formal leadership program. Community leaders set CHP's campaign strategy, lead local organizing teams, take action regularly, and develop into campaign and organizational leaders that vote on CHP's organizational and policy priorities. At present, CHP is investing work to shape public narratives about health and health care. Convening a dedicated team of leaders (the team with which COMM researchers collaborated) is one component of this investment in narrative strategy.

For more information on CHP, visit the QR code above, or email:

Marissa Hallo, Senior Communications Organizer Center for Health Progress marissa.hallo@centerforhealthprogress.org





About the Collaborative on Media and Messaging for Health and Social Policy (COMM HSP)

COMM HSP (commhsp.org) is an interdisciplinary team of researchers who study how media and messaging shape opinions, attitudes, and behaviors of multiple audiences. They co-design, conduct, and disseminate results of this research to enhance understanding of the ways that communication can help to advance health and racial equity through health and social policy. Collectively, their research tracks the content of media (including news and advertisements); examines the impact of media messaging on attitudes, values, and behavior; and identifies new opportunities to work with journalists, public health officials, affected communities, organizers, and advocacy organizations to put the research findings into practice to advance health and racial equity.

For more information on COMM HSP, visit the QR code above, or email: Sarah Gollust, Professor, Division of Health Policy & Management University of Minnesota School of Public Health sgollust@umn.edu

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