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What the Obesity Prevention Field Can Learn from the Gay Marriage Movement

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In the US, two-thirds of adults and one-third of children continue to be affected by overweight or obesity despite two decades and billions of dollars' spent in public health efforts.¹ In the last decade, public health has stepped up its call for greater emphasis on environmental and policy interventions, including active designs in urban planning and restrictions on food marketing to children, to incentivize healthy behaviors and disincentivize less healthy ones.² However, there has been little success in policy change to prevent obesity.³ Voters in Berkeley, CA recently passed a one-cent-per-ounce soda tax, but a similar measure was defeated by voters in San Francisco, CA, which joins 30 other municipalities to date in opting not to adopt such a policy. Analysts have attributed the defeat in San Francisco, in part, to the lack of outreach to low-income and minority communities.⁴ Indeed, the lack of public mobilization in relation to obesity prevention was extensively discussed in a recent paper.⁵ No other contemporary movements have shifted public opinions more effectively and more rapidly than the gay marriage movement in the United States, which has been unfolding in parallel to efforts to prevent obesity. In this commentary, we describe how the gay marriage movement has succeeded so far in hopes of providing insight to the field of obesity prevention.

The achievement of legal gay marriages in now 37 states and the District of Columbia (a Supreme Court ruling on nationwide marriage equality is pending) mirrors the doubling in public support for gay marriage in two decades, from 27% in 1994 to 54% in 2014.⁶ The increase in public support has increased the willingness of voters, legislators and judges to consider the

merits of legalizing marriage for gay couples. Four critical factors contribute to this success: the adoption of shared agenda and goal; strategic media advocacy; a central coordinating infrastructure with distinct political, financial and legal arms; and grassroots campaigning.⁷ Each of these has implications for the future of obesity prevention.

Adoption of shared agenda and goal

The adoption of a shared agenda among diverse actors in a movement ensures that the message is consistent, activities are coordinated and reinforcing, and resources can be pooled. Marriage became the dominant rallying point over the last decade because of its symbolic social meaning and because no other social institution confers as many rights and benefits (>1,000 federally) in one classification. Consistently positive in its message, the movement steers away from provoking opponents and their beliefs. It humanizes the debate by shifting away from the secondary but important aspects of marriage, such as benefits and taxes, to the fundamental question: Why exclude loving couples from marrying? Though many policy options including soda taxes, food marketing regulations and urban planning approaches are at play, the obesity prevention field lacks coherence in prioritizing efforts. The field could use consensus conferences to adopt a shared agenda through prioritizing and sequencing action items.

Strategic media advocacy

The gay marriage movement conducts effective, emotive and compelling strategic media advocacy campaigns. The movement maintains a presence in traditional and online media. It collects data and conducts polling to understand how the public understands the issue and changes perspectives. Field agents are trained to acknowledge differences and engage citizens

with sensitivity. The movement features committed couples to craft positive, relatable media messages. It enlists broad political support including celebrities and unexpected allies. It features non-traditional advocates such as blue collar Americans, conservatives, and siblings with different sexual orientations to “hit home” with messages. Obesity prevention needs to craft a unifying message and use storytelling approaches with effective frames that resonate with the public. Already coordinating research activities, the National Collaborative on Childhood Obesity Research may be well situated to serve as a coordinating body for messaging.

Central coordinating infrastructure

The gay marriage movement is a well-coordinated and integrated operation with distinct political, financial, and legal arms working in concert. Freedom to Marry operates primarily at the state level while the Human Rights Campaign operates nationally. Wealthy donors who believe in the cause (including a Republican political donor, Paul Singer, whose son is gay) and membership drives in the gay community have contributed hundreds of millions of dollars to the marriage fight, but one organization – the Gill Foundation – has been instrumental in serving as the financial backbone of the movement. On the legal front, leading gay and lesbian rights organizations and the American Civil Liberties Union coordinate cases and strategies for litigation in the courts. This integrated approach has proven to be effective in shifting the political landscape at the local and state levels and in bringing bipartisan support to the judicial process.

Mainly led by government agencies and foundations unable to lobby, the obesity prevention movement has not fully engaged the political landscape. A new organization or new partnerships can serve as a lobbying platform and play a more integrated, political role.

Grassroots campaigning

The gay marriage movement understands that the political fight cannot be won if it does not create the popular pressure for elected officials and judges to act. Sophisticated grassroots operations target antigay politicians in favor of gay-friendly candidates. In each electoral or legislative fight, an army of volunteers is trained and go door to door to engage fellow citizens in understanding the issues at stake, in contacting their locally elected leaders, and in publicly showing support for marriage equality. The grassroots operation reaches out to non-traditional allies, such as members of the clergy from diverse faiths and the business community, who believe in diversity and equality. This broadens the tent of actors and helps take the issue into the mainstream. In addition, the grassroots effort is key to fundraising. In states where pro-gay marriage measures had a strong likelihood to succeed, Freedom to Marry helps coordinate events. It uses innovative social media and digital tools through its Digital Action Center to keep the public and supporters engaged and updated. By building and sustaining the momentum, the grassroots effort helped raise \$6 million in 2014 for the marriage fight.

Besides advocacy groups such as the Obesity Action Council, the obesity prevention field lacks grassroots mobilization. To fill this gap, the Obesity Society and the American Public Health Association could partner with national and local organizations to connect the public to specific policy goals, activate voters, support allied politicians, and shift the political landscape. Public

health schools could move from didactic to action-oriented curricula to increase the field's ability to mobilize communities.

Conclusion

Unlike the gay marriage movement, goals in the obesity prevention field are diffuse and disjointed. There is little active management and coordination of media messages. The field is fraught with uncoordinated programs and diluted resources. Funding is often distributed in the spirit of breadth at the expense of impact and depth. The obesity prevention field needs to cohere around a limited set of strategic policy goals for the next 10-20 years. It needs a coordinated political infrastructure that can engage in lobbying, coordinate grassroots campaigning and litigation, with the savvy of media advocacy. It must build broad coalitions that include non-traditional partners (e.g., environmental, industry, animal rights, faith based groups, etc.). To significantly reduce the prevalence of obesity, we need a movement, not just programs and policies.

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