



Advocacy coalitions involved in California's menu labeling policy debate: Exploring coalition structure, policy beliefs, resources, and strategies



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ABSTRACT

Advocacy coalitions often play an important role in the state health policymaking process, yet little is known about their structure, composition, and behavior. In 2008, California became the first state to enact a menu labeling law. Using the advocacy coalition framework, we examine different facets of the coalitions involved in California's menu labeling policy debate. We use a qualitative research approach to identify coalition members and explore their expressed beliefs and policy arguments, resources, and strategies by analyzing legislative documents ($n = 87$) and newspaper articles ($n = 78$) produced between 1999 and 2009. Between 2003 and 2008, six menu labeling bills were introduced in the state's legislature. We found the issue received increasing media attention during this period. We identified two advocacy coalitions involved in the debate—a public health (PH) coalition and an industry coalition. State organizations acted as coalition leaders and participated for a longer duration than elected officials. The structure and composition of each coalition varied. PH coalition leadership and membership notably increased compared to the industry coalition. The PH coalition, led by nonprofit PH and health organizations, promoted a clear and consistent message around informed decision making. The industry coalition, led by a state restaurant association, responded with cost and implementation arguments. Each coalition used various resources and strategies to advance desired outcomes. PH coalition leaders were particularly effective at using resources and employing advocacy strategies, which included engaging state legislators as coalition members, using public opinion polls and information, and leveraging media resources to garner support. Policy precedence and a local policy push emerged as important policy-making strategies. Areas for future research on the state health policymaking process are discussed.

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1. Introduction

At the beginning of the 21st century, the obesity epidemic was elevated to the forefront of the U.S. health policy agenda due to mounting evidence on the population health impact of obesity and its associated costs (Oliver, 2006; US Department of Health and Human Services, 2001). Policymakers responded with policies and funding to improve dietary behaviors and promote physical activity (Kersh and Morone, 2005). New stakeholders and

audiences were drawn to the issue, increasing the number of organizations engaged in health policy advocacy activities. The field transformed from a policy iron triangle—with its tight relationship between legislative committees, government agencies, and interest groups—into policy networks (Kim and Roh, 2008; Peterson, 1994).

Advocacy coalitions have emerged in support of, or opposition, to obesity-related policies. These coalitions engage in political strategies and debates to impact policy through legislation or litigation (Burriss et al., 2010; Sabatier, 1988). Coalitions include a variety of participants, including elected officials, nonprofit organizations, journalists, and trade associations (Davis and Davis, 1988; Sabatier, 1991; Sabatier and Weible, 2007). There are many reasons why an organization would participate in a coalition, such

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as shared ideology or values, networking opportunities, resources, information, and similar desired outcomes (Butterfoss and Francisco, 2004). While it is well known that advocacy groups contribute to the federal policymaking process in the U.S. (Kingdon, 1995), more theoretical policymaking process research is needed (Breton and De Leeuw, 2011; Breton et al., 2008) to examine advocacy coalitions' composition, behavior, and involvement in state-level policy processes (Apollonio and Bero, 2009; Weible, 2007).

The advocacy coalition framework (henceforth, ACF) posits advocacy coalitions are composed of individuals with similar policy belief systems who engage in coordinated activities to promote their position (Kim and Roh, 2008; Sabatier and Weible, 2007; Weible et al., 2009). Public policies are conceptualized as belief systems that involve “value priorities, perceptions of important causal relationships, perceptions of world states (including the magnitude of the problem), perceptions of the efficacy of policy instruments, etc.” (Sabatier, 1988, 132). A coalition's policy beliefs and resources also inform the strategies a coalition pursues. Coalition resources consist of engaging elected officials or policymakers with formal authority to make policy decisions, amassing public support, strategically using information, mobilizing members, spending financial resources, and cultivating skillful leadership (Butterfoss and Kegler, 2002; Sabatier and Weible, 2007, 201–203).

In this article, we use the ACF to explore the structure, membership, and behavior of advocacy coalitions involved in California's menu labeling policy debate. Specifically, we: 1) examine the structure and membership of the coalitions and their participants (individual and organizational) and 2) explore expressed beliefs, policy arguments, resources, and strategies employed.

1.1. Theorized advocacy coalitions and expressed beliefs and policy arguments

The structure and composition of the advocacy coalitions involved in California's menu labeling policy debate may be similar to that of coalitions involved in other health policy debates. To our knowledge, only one study has previously examined advocacy coalitions involved in a menu labeling policy debate. Johnson et al. describe the policy process surrounding the passage of Washington state's countywide menu labeling policy. They identify two advocacy coalitions—a public health (PH) and an industry coalition (Johnson et al., 2012). Similarly, previous tobacco policy studies found anti-tobacco coalitions consisted of health care organizations, public health nonprofit organizations, and government agencies, whereas pro-tobacco coalitions included industry representatives (Bero et al., 2001; Breton et al., 2008; Fallin and Glantz, 2015; Princen, 2007).

Based on these studies, we hypothesize two coalitions—a PH and an industry coalition—were involved in California's menu labeling policy debate. We also propose these advocacy coalitions espoused arguments based on values and beliefs about obesity such as whether individuals or the environment cause obesity. Individual-level beliefs about the cause(s) of obesity can help explain support for different policy positions (Barry et al., 2009; Brownell et al., 2010; Pearl and Lebowitz, 2014). Advocates who attribute obesity to personal responsibility say obesity is caused by individual decisions and use rights-based and self-determination arguments, supporting limited government regulation (Bero et al., 2001; Cohen et al., 2000). Blame metaphors and narratives are also used to describe the consumption and availability of unhealthy food. For example, “sinful” behavior ascribes individual blame (Thibodeau et al., 2015). In contrast, PH advocates focus on the role of the food environment and use phrases such as “toxic” food

environment (i.e., the increased availability of inexpensive, calorie-dense foods like junk and fast foods) and support policies to modify the food environment (Barry et al., 2009; Brownell and Horgen, 2003). We theorize that, if two advocacy coalitions participated in California's menu labeling policy debate, the PH coalition supported policies and regulations to modify aspects of the food environment to reduce the obesity rate while the industry coalition opposed these policies and regulations based on personal responsibility attributions.

2. Methods

We use historical and content analysis methods to identify stakeholders and examine their menu labeling policy arguments. We identify multiple levels of stakeholders involved in the policy subsystem, with a focus on the *meso* and *micro* levels where policy networks, coalitions, and actors are central (Kim and Roh, 2008). Comparable stakeholder analyses have been conducted in ACF studies on expanded after-school programs (Brecher et al., 2010) and federal environmental policy (Ellison and Newmark, 2010).

2.1. Data collection

Our primary data sources are legislative bill documents and newspaper articles—potential repositories for the policy positions, values, and beliefs of policy elites and stakeholders (Apollonio and Bero, 2009; Brecher et al., 2010; Burriss et al., 2010; Davis and Davis, 1988; Jenkins-Smith et al., 1991). The data collection study period was 1999–2009, since at least a decade is recommended to understand the policy change process (Sabatier, 1991). Prior to data collection, we verified that legislative documents contained stakeholders' written commentary (Bero et al., 2001).

Fig. 1 depicts the data search process, which was a systematic search for legislative bill documents and newspaper articles related to restaurant menu labeling policies in California. Legislative bill documents included information documenting a bill's history, status, amendments, analyses, votes, and veto messages. Newspaper articles on menu labeling policies outside of California were excluded. Case studies and reports provided supplementary data.

2.2. Data analysis

The legislative bill documents were prepared and uploaded into the qualitative analysis software NVivo for coding and analysis (QSR International Pty Ltd., 2012). Since the newspaper articles were available in different formats, coding and analyses were completed manually on hard copies of the articles.

Coding focused on identifying: 1) advocacy coalition members (supporters and opponents) and 2) expressed beliefs and policy arguments. We were aware that the expressed beliefs and policy arguments in these documents could differ from the actual beliefs of individual coalition participants (Jenkins-Smith et al., 1991). Since our data sources consist of publically available documents, policy belief system data could be missing if stakeholders avoided sharing personal or controversial perspectives.

We developed an initial codebook based on our research questions and theorized advocacy coalitions and expressed beliefs and policy arguments (Bero et al., 2001; Kennedy and Bero, 1999; Miles and Huberman, 1994). We piloted the codebook with at least one of each type of legislative document and fifteen newspaper articles. Piloting included open coding to identify emergent themes (Corbin and Strauss, 2014). For example, *a priori* belief or policy argument codes included personal responsibility and environmental attributions. Emergent belief and policy argument codes included informed decision making and negative economic impact.

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