





Copyright © 2012 by the Center for Social Inclusion

All rights reserved. No part of this report may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopying, recording or by any information storage and retrieval

system, without the permission of the Center for Social Inclusion.

For any commercial reproduction, please obtain permission from

the Center for Social Inclusion, 150 Broadway, Suite 303 New York, NY 10038.

Phone: +1.212.248.2785

Email: info@thecsi.org

centerforsocialinclusion.org

The Center for Social Inclusion works to unite public policy research and grassroots advocacy to transform

 $national\ organizations\ to\ develop\ policy\ ideas,\ foster\ effective\ leadership,\ and\ develop\ communications$

tools for an opportunity-rich world in which we all will thrive.

CAL CENTER FOR SOCIAL INCLUSION

Acknowledgements	4
Introduction	5
Why Message Testing	6
Developing the Messages	8
Testing	9
Results	10
Key Findings	11
1. We must describe problems and present messages in emotional terms	11
2. We must explain what "shared fate" is in racially-explicit, concrete terms	12
3. We must take on the "race wedge."	12
4. We must reframe victims and enemies	13
5. Always end with a solution	13
Implementation	13
Next Steps	15
Research Limitations	16
Conclusion	17
Appendix 1 (Health Care Messages)	18
Appendix 2 (Subprime Lending Messages)	20



The Center for Social Inclusion (CSI) thanks the Ford Foundation, Open Society Foundation, Hull Foundation, Schooner Foundation and the Wallace Global Fund for their generous support for this study.

By 2042, the United States will be a nation comprised primarily of people of color. Even sooner, by 2032, the majority of Americans less than 30 years of age will be Latino, Black, Asian/Pacific Islander, and Native American. If persistent racial disparities and growing racial tensions accompany this demographic shift, we should all be concerned about the nation's future well-being. Now more than ever, we have a collective responsibility to discuss race in the context of solutions that work for all of us.

Instead, progressive advocates and policy makers are debating whether, or how, to talk about race while conservatives contend that fairness requires color blindness and that our society is already post-racial. This effectively allows conservatives to level claims of racism or "playing the race card" when racial justice advocates try to raise the topic. Making matters more complex, some conservatives will claim post-racialism in one sentence and use race and ethnicity, often subtly, to divide people in the next.

The use of race as a wedge between Whites and people of color, or even between people of color, is alarmingly effective at a time when most Americans are facing economic hardships. Communities of color are disproportionately impacted, but Whites are also losing ground. If we can eliminate the race wedge, we raise the possibility of moving people around their common self-interests to support policies that promote equity and opportunity for all.

The importance of talking about race in the right ways has never been greater. But can we? And if so, how? To find out, the Center for Social Inclusion (CSI) teamed up with Westen Strategies, LLC to develop and test multi-media messages on two hotbutton issues — health care reform and subprime lending.

The results showed convincingly that it is better to address race than to avoid it. Progressive messages that took on race beat conservative messages, and they were more effective than progressive messages that were race neutral.

CSI has been bringing the lessons of our communications testing to the field through workshops, in-depth trainings, a webinar, and publications like this. We are equipping grassroots advocates to develop their own effective messages and strategies to take on the race wedge and build support for progressive policies benefiting communities of color.

At the same time, we are working with Westen Strategies, LLC on a new round of tests focused on immigration reform and Medicaid expansion. We are deepening our knowledge of what works to share more lessons and strategies with the field to improve our national conversation about solving our collective problems in equitable ways.

To assess the extent to which race is a factor in how the public digests policy discussions and political positioning, CSI partnered with Westen Strategies, LLC to conduct a message testing research project. As opposed to polling, message testing seeks to get at the underlying consciousness of people. While polling may highlight where people stand on an issue at a particular time, it does not get at the depths of what people are thinking.

Instead of just asking questions, message testing runs messages that elicit a comprehensive response. For example, in our message testing participants could freely move a dial up and down, based on their initial reaction to the message. This helps us assess people's immediate responses, allowing us to gauge their unconscious bias and see what parts of a message motivate or turn-off a person.

The goal of our message testing project was to test the extent to which talking about race helped or hindered in persuading people to support progressive policy reforms. The results, we hoped, would identify an effective strategy for neutralizing the race wedge in actual policy debates in order to build support for progressive solutions.

The purpose of our message testing was to answer these questions with empirical evidence:

- Should policy advocates address race when developing messages on key social issues, such as the economy and health care, or should they avoid any overt references to race?
- What messages might best neutralize the race wedge and begin to raise a "linked-fate" frame across racial groups?
- Does support or openness to government programs or interventions change when messages address race explicitly, implicitly or not at all?
- What messages were most likely to appeal to independent "swing" White voters?

The research was designed to determine peoples' responses to specific conservative and progressive messages on health care reform and the subprime mortgage crisis. We chose these issues because they had sparked hotly contested contemporary debates, often rancorous and ideological. They were also both examples of the typical fault line between government programs versus private market solutions; prosperity through public funding streams to human and infrastructure investments versus corporate subsidies and giveaways to engage the private sector. Moreover, the two issues concerned all Americans regardless of race. And though they were seemingly race neutral, race was being used, sometimes quite subtly, as a wedge to deter support for progressive policies.

On health care, for example, conservatives countered proposals that would have extended insurance coverage to all by raising the specter of health care reform creating a "public burden" because of reliance on public benefits by undocumented immigrants and those considered to be the undeserving poor – terms that are code for people of color. Some politicians and pundits were more overt using images of young Latino men depicted as "illegal aliens" or "criminals" who would get "free health care".



In a perverse reworking of the facts, conservatives depicted the victims of predatory lending - who were disproportionately people of color - as the cause of the mortgage crisis and financial collapse. Tea Party leaders like Michelle Bachmann pointed the finger at ACORN, an organization of low-income Blacks and Latinos, and the Community Reinvestment Act, which they claimed forced banks to lend to risky inner-city, i.e. people of color borrowers.



For each issue – health care reform and subprime lending – we developed four separate messages:

- 1. A conservative message
- 2. A progressive but "race-neutral" message
- 3. A progressive message that subtly or implicitly brings up race
- 4. A progressive message that explicitly addresses race

Each minute-long message combined storyboards with visual images and audio. Each was crafted based on extensive research and experience, including an analysis of the networks of ideas, images, emotions, and attitudes in people's minds when they hear about the problems confronting the nation on health care and subprime lending, and the differing ways proposed to address them.

In the research stage, CSI examined polling data, policy positions, and media reports in order to understand the public discourse that was taking place around health care reform and subprime lending. We collected position statements from conservative commentators, advocacy groups, and elected officials to ensure that the conservative test messages we created used the actual arguments conservatives mounted.

CSI drafted the conservative messages, and based on research provided by CSI and additional research it conducted, Westen Strategies, LLC drafted the three variations of progressive messages for each issue. For this study, "progressive" messages were those that advocated for health care reform and that blamed the fiscal collapse on the decisions made by commercial banks, rather than on consumers.

The race-neutral progressive messages used the message framework for supporting government suggested by the *Frameworks Institute*. For the race-subtle and race-explicit messages, visual images and language were chosen carefully with unconscious bias, also known as implicit or hidden bias, in mind.

The ordering of the visual cues and their pairing with different parts of the messages were as important as the messages themselves. People rely on symbols, images, and metaphors to process information and form an opinion. We call these cognitive frames or "networks"—interconnected thoughts, feelings, images, and emotions that essentially set the stage for the way anything is seen or heard. Because words and images activate different networks (e.g., victims of bank trickery or fraud vs. irresponsible people who want a big home whether or not they can afford it), we must be intentional about how we organize and present our messages. For example, conservatives create the narrative of anti-government by pairing their message of government waste and abuse with images of people of color. To counter this conservative framing, people must first see themselves as part of the message. For example, our progressive message targeted towards independent swing White voters on health care reform would open with images of White people and introduce images of people of color later in the message.

Our research, using on-line dial testing, took place between November 30, 2009 and December 4, 2009. This methodology allowed us to set up a head-to-head real time competition between the conservative and progressive messages. The dial-test showed moment-to-moment respondent evaluations as they viewed the test messages.

After answering initial demographic questions, participants were told they are about to see and hear messages on issues that concern the country. Every participant in the study was first exposed to the conservative message on health care, and then heard one of the four progressive health care messages. Following some questions designed in part to break up the testing and avoid carryover effects, respondents were then exposed to the conservative message on the financial crisis followed by one of the four progressive messages.

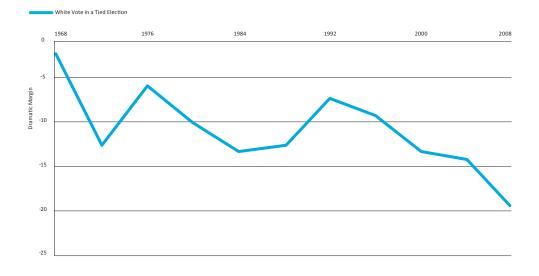
All participants rated the storyboard messages and indicated whether they preferred the conservative or progressive message, and then completed a follow-up survey about racial attitudes.

Participants in the test were a representative national sample of 900 registered voters matching the demographics of the eligible voting population. We were particularly interested in swing White voters based on the assumption that they may be susceptible to race wedge manipulation, but are not ideologically entrenched. In order to win public support for important progressive policy reforms, they are an important audience and seem to be the audience that progressive advocates are most reticent to engage with on race.

The demographic characteristics of survey participants are:

Gender	
Male	57%
Female	53%
Age	
18-24	5%
25-39	22%
40-54	45%
55 and Over	27%
Race/Ethnicity	
White	76%
Black/African American	12%
Hispanic	8%
Other	4%
Partisan Identification	
Strong Democrat	20%
Strong Republican	14%
Swing Voter	65%
Educational Attainment	
High School or Less	21%
Tech/2yr Program	46%
Undergraduate Degree	20%
Graduate/Professional Degree	13%
Region	
Northeast	20%
Midwest	26%
South	33%
West	21%

White "Swing"



The results of the dial test confirmed our hypothesis that talking about race explicitly can be effective in winning support on issues compared to ignoring race all together. When a message scores above a 60 on a 0-100 scale, the results indicate that this message is likely to be successful to your target audience, depending on how strong the opposition message is. It is important to note that all messages scored above this range, despite the fact that the conservative message and explicit race messages use different frames and values. However, the race-explicit messages received more robust support compared to all other messages.

In the health care messages, the explicit race message received an overall 76.2 rating compared to a 68.1 for race-neutral progressive race message often utilized by the Frameworks Institute. And respondents rated this message, on average, nearly 13 points higher than the conservative message.

Results of Healthcare Messages Average agree/disagree rating (0–100)



After each message, we asked respondents: How much do you agree or disagree with the message you just saw? Please give a rating from o-100, where 100 means you totally agree, and o means you totally disagree.

In the subprime messages, the implicit/explicit race message fared best. This message was explicit in addressing race through wording, but the images were less "in your face" to White swing voters compared to the pure explicit message. The implicit/explicit message received an overall 80.5, nearly 11 points better than the race-neutral message and almost 14 points better than the conservative message. The race-explicit message did not fare as well in the subprime testing. We suspect that the reason for this was twofold. First, instead of first showing the bankers who caused

Results of Subprime Lending Messages Average agree/disagree rating (0-100)



After each message, we asked respondents: How much do you agree or disagree with the message you just saw? Please give a rating from o-100, where 100 means you totally agree, and o means you totally disagree.

the crisis, we first showed poor people of color. So we had not yet offered White swing voters an alternative about who had caused the crisis before suggesting that it was not, in fact, the poor people of color. Second, we used sarcasm in attacking the view that poor Black people had the power to crash the world economy, which appeared to turn off White swing voters.

The key to winning on public policy debates in which race is an implicit or explicit component is to make it explicit. Messages that address race in policy debates beat conservative messages and are more effective at doing so than progressive messages that avoid race.

Overall, the findings from the dial tests reveal that in a race-conscious society, we can, and must, talk about race to win public debates on contested policy issues. The most effective messages were those that directly primed the linked fate of all communities with the dominant American values of hard work and fairness. Contrary to what many believe, the primary finding from this research on health reform and the mortgage lending crisis was that voters do not respond negatively to explicit messages about race. As individuals who live in a racially stratified society, American voters are aware of the nuances of race in public conversations about social policy.

Based on the evidence from our message testing research, we offer four key findings about how to communicate effectively about race:

We must describe problems and present messages in emotional terms

Our progressive messaging on health care emphasized that millions of Americans lost insurance when they lost jobs. For subprime lending, the message emphasized that millions of Americans have lost homes and had their dreams foreclosed, largely due to the "gambling practices" of predatory lenders. Both of these messages appealed to the emotions of people affected by a troubled economy. When messages began with pictures of White people, we found that White swing voters are more likely to connect. Messages that grab the voter at the emotional level, especially when coupled with a "shared fate" framework, effectively convince the voter to lean toward a more progressive response to political issues.

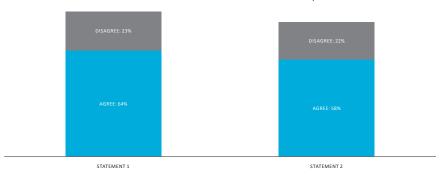
"We're all one tumor away from financial disaster"

STATEMENT 1:

STATEMENT 2:

I wouldn't be for any health care bill that covered illegal immigrants.

If illegal immigrants pay for their own health insurance under Obama's health care plan, that would be better than having 12 million people in this country without health care.



"The pain of losing your home doesn't come in different colors. It feels just the same whether you're White, Black, Hispanic or Asian. It feels the same whether you're male or female...We need tough, new regulation to prevent this from ever happening again. If banks and credit card companies have something to say, they shouldn't be allowed to say it in the fine print."

2. We must explain what "shared fate" is in racially-explicit, concrete terms that foster identification, rather than using shorthand terms such as "shared fate" so that White voters in the center come to see that they do in fact have a shared fate with people they begin by defining as "other."

We should shy away from polarizing messages. Messaging on the economy emphasized that people of all racial backgrounds feel the same when they lose their homes. Likewise, on the issue of health care, messaging emphasized the common need for health care. Everyone understands crisis, and when political messages are crafted to explicitly incorporate how everyone could be affected, voters are more empathetic and likely to embrace a more progressive policy stance.

"This isn't about illegal immigrants, it's about American citizens. It isn't about welfare, it's about people who work for a living and still can't afford insurance—or who lost their insurance when they lost their job."

3. We must take on the "race wedge"

On health care, our race-explicit messaging addressed the misperception promoted by conservatives that the real issue was giving benefits to undocumented immigrants or the undeserving poor. By explicitly framing the debate as "not about illegal immigrants or welfare," proactive policy suggestions drew voter support.

In the follow-up questions, we found that whether or not voters support health care for immigrants depends on the framing. Voters were asked whether they agree or disagree with the following two statements:

The two statements are intentionally contradictory, yet large majorities of respondents supported both. As the figures to the left show, by roughly a 2:1 margin precisely the same voters either agreed that immigrants should or should not be covered simply depending on how the question was framed. The first message activated "law and order" as a primary value, whereas the second activated fairness, personal responsibility, and decency.

4. We must reframe victims and enemies

Winning messages on the subprime mortgage crisis presented Wall Street as "gamblers," who are commonly perceived negatively in our social construct. The negative connotation was reinforced when their gambling was presented as having made hard working Americans their victims. That approach also worked on messaging associated with health care, which positioned insurance companies as enemies victimizing people who work for a living.

[The Health problem in America] can affect any of us at any time. A heart attack, a child with asthma, a bad back—to insurance companies, [they're all] just another preexisting condition.

5. Always end with a solution

Messages will not have the lasting impact or influence if we fail to provide a solution or an alternative to what the other side offers. Always end your message with a solution to the problem you start with. The solutions should be of broad benefit, where your audience can see themselves as part of the solution – solutions do not always have to be a personal benefit, but can be a benefit for the entire nation.

CSI's interest in message testing is not academic; it's pragmatic. We are committed to structural transformation that addresses racial inequities and creates opportunity for all. We know that effective communication is an integral part of the strategy necessary to achieve our goal. We also know that messages are only as good as their actual implementation and impact on the public conversation.

Based on our years of experience in policy strategy and capacity building, CSI believes that successful communications requires careful attention to context, credible leadership, coordination with organizing and advocacy strategies, and development of onthe-ground capacity. As a result, when we began to consider how to share what we have learned in our empirical testing, we wanted to design a creative space for advocates that would empower

"We need tough new regulations to prevent [the subprime crisis] from ever happening again. If banks and credit card companies have something to say, they shouldn't be allowed to say it in fine print or to triple our interest rates without notice."

them to learn and then create their own messages and communications strategies in the context of political realities, unique cultural levers, and their larger goals. These are key ingredients to impact how the public in any given state or community thinks about race in connection with problems and solutions.

We developed a set of trainings that begin by introducing a structural race analysis and understanding of how race factors into public policy. Participants begin to identify entry-points for doing structurally transformative work and building multiracial alliances. The second phase of the trainings introduces communications and race, including a practical understanding of how cognitive framing and unconscious bias impact how people think about race. We then share the lessons of our message testing and take participants through a process of developing their own messages to try out in their work. Ideally, participants arrive at a consensus about how to frame an issue of mutual concern so they can employ common messaging in their public communications.

We were fortunate to have an ideal opportunity to build out our communications strategy work in partnership with Community Catalyst, a national health policy advocacy organization. Community Catalyst had been working with state level advocates, organizers, and policy groups across the South to build their capacity to do health care reform work. CSI worked with their "Southern Health Partners" in Louisiana, Mississippi, and Texas, and brought additional leaders with whom we had relationships into the process. As a result, the trainings we catalyzed brought together—many for the first time—diverse groups of advocates, service providers, and organizers with a variety of areas of expertise and issue-related work, not only on health policy.

In each state, we collaborated most closely with an anchor partner to make the trainings responsive to local relationships, priorities, and dynamics. We looked for partner organizations that were engaged in health care reform but also had multiple issue interests, had strong grassroots connections, were led by people of color and committed to addressing racial inequity. In Texas, our anchor partner was La Fe Policy Research and Education Center, a Latino-led health policy advocacy group with deep roots in Latino communities in San Antonio and South Texas. Our Louisiana anchor partner was Louisiana Consumer Health Care Coalition (LCHCC), a newly-established Black-led health policy organization. In Mississippi, we worked with Mississippi Health Advocacy Program and the Children's Defense Fund's Southern Rural Black Women's Initiative (SRBWI), as well as the Mississippi State NAACP. Through consultation with our anchor partners and interviews with other invited participants, we tailored our trainings to local circumstances and provided customized tools, such as maps illustrating health disparities in their individual states.

The trainings, conducted from October 2010 to March 2011, were hugely helpful according to participants we surveyed and interviewed. The major impact, they indicated, is an ability to talk about race more effectively. In Louisiana, participants

were very diverse, representing policy organizations, community groups, health care providers, government agencies, and academics, as well as representing the African American, Vietnamese and White communities. Noting how difficult it is to talk about race, Moriba Karamoko of LCHCC said, "Just getting a group together to have that conversation is a very important first step. The sessions helped us to get to a common place."

Texas trainee Rachel Udow noted, "I will be less leery about addressing the race wedge when talking to other stakeholders. Before we would talk about race with receptive audiences but would not have thought to frame in terms of race with White, middle class audiences. The message is if we improve conditions for people of color it will be better for everyone."

Texas participants working in different issue areas, such as food security, health care policy, environmental justice, and immigrant rights found connections between their areas of work and laid the groundwork for new long-term strategies and relationships. They agreed on a set of principles and values-based messages that they are incorporating into their organizations' communications. The common goal, reported Amy Casso of La Fe, is to change the discourse, put the right on the defensive and use race as a mechanism because they are using it as a wedge. "We're totally integrating the frames we developed in letters to elected officials, op-eds, and other communications," she said.

While successful in building communications strategies for partner organizations, we faced several challenges in the course of this work. One was the increasingly difficult political terrain faced by health care advocates. More conservative legislatures following the November 2010 elections, paired with state fiscal crises, made arguing for public investment in health care extremely challenging. Another issue was the uneven and often weakened capacity of local groups to contest state policy decisions. This is particularly true in communities of color, which have faced systematic disinvestment and disenfranchisement. Even where strong statewide health care coalitions are active, like in Texas, communities of color often do not have the relationships, funding, or support to participate as active partners. While CSI's trainings were a beginning and highlighted the benefits and strides that could be achieved by proactive strategy development and alignment, these realities remain. Lack of capacity makes it difficult for some to consistently apply the lessons and strategies developed during the trainings.

CSI, with Westen Strategies, is conducting a second wave of message testing on two issues we expect to be hotly contested over the next year — immigration reform and Medicaid expansion.

We particularly want to deepen our understanding of unconscious bias and how it operates in the context of immigration reform debates. We also want to increase our

knowledge about the impact of the use of language like "illegal immigrants". In our first set of tests, we used that term deliberately but not without great angst. "Illegal immigrant" is not language we, as an organization, are comfortable with or that fits our own "frame." At the same time, we understood our goal as testing how to talk to White swing voters who start from a significantly dissimilar vantage point and whom we want to move to thinking very differently about race and ethnicity.

We knew from Westen Strategies' previous work that the term "illegal immigrant" actually polled substantially better than "undocumented workers," making swing White voters more likely to agree with a message on comprehensive immigration reform despite the seemingly pejorative meaning of the term "illegal immigrants." White swing voters tended to hear "undocumented" as a euphemism, and have become so used to hearing "illegal immigrant" that they do not hear it as particularly pejorative—in fact, they strongly prefer it to "illegals" or "illegal aliens," which they appropriately experience as dehumanizing.

Our testing got us to conscious support for messages that called for allowing undocumented immigrants to be able to buy health insurance, a significantly more progressive policy than what actually emerged from health care reform legislation. But we want to know if getting there using the words "illegal immigrants" reinforces bad frames of Latinos or not e.g. Latinos as gangbangers, "anchor babies", and the like. Phase two of our empirical testing will answer this question.

CSI and Westen Strategies also will be conducting additional empirical testing on Medicaid expansion. Phase one testing shed light on how to successfully neutralize the race wedge and develop support for public programs. But what about programs perceived as benefiting people of color even though they are universal programs? Medicaid is a prime example. The implementation of federal health care reform legislation includes expanding Medicaid coverage, which is a battleground issue for racial justice and anti-poverty groups. The debate over Medicaid expansion will be a good testing ground for messaging aimed at building support for other forms of public welfare programs as well.

CSI will also continue to produce and share tools and provide trainings to enable the field to create its own effective policy and communications strategies towards a transformative agenda on racial equity.

While the findings of this study present a compelling case for the strategic use of race-explicit messaging, there are some limitations associated with this study. Dial tests only allow researchers to measure conscious responses, rather than both implicit and explicit responses to messages.

The progressive message that performed the best in the economic crisis series was the race-implicit version. This may have occurred for two reasons: (1) message order: In the race-explicit message the message references people of color before White people; and (2) the message was particularly sarcastic, to which according to the dial tests, people responded poorly (e.g., "let me get this straight, this crisis was because of poor African American and Latino people who didn't pay their mortgages, and not these guys [picture of wall street bankers]?").

The other limitation associated with this study is that it is difficult to determine whether participants respond poorly to a message because it was sarcastic, or because they agree or disagree with its content.

Discussing race in an intelligent fashion is imperative in our society, or we run the risk of it being manipulated and used to undermine access to basic human services for poor people and people of color. Through effective and strategic communications using race, we can remove the function of race as a wedge between conservative and liberal or progressive people on upcoming debates. When crafted this way, race-explicit, progressive messages can sway swing voters on social policy issues.

Though every struggle is as different as every community, lessons from this research can inform strategies that are developed on other issues. By framing issues in emotional terms, while elevating the shared values that unite us, policy advocates can introduce race into public debates without using people of color as scapegoats or aggressively attacking conservative or independent people as racially biased—and win!

HEALTH CARE MESSAGES: CONSERVATIVE VERSUS RACE EXPLICIT

Table 1: Conservative Message

Families should be in charge of their health care dollars.



Rising health care costs are a problem, and the best way to bring them down is to increase competition among health care providers and put an end to these million dollar lawsuits that drive up insurance costs and put doctors out of business.



The free market can do this by encouraging more competition, and we can help people deal with the rising costs of coverage with health savings accounts that allow people to manage their own health care decisions. The answer to our health care problems is a freer market, not socialized medicine and a skyrocketing deficit.



The last thing we need is the government taking over health care, which would create a massive bureaucracy, create a costly new entitlement program for the poor, and give free health care to illegal immigrants. Sure, we have problems, but Americans still have the best health care in the world. Europe and Canada have government run health care, and their patients come here for treatment due to long waits and poor quality care.



The answer to our health care problems is a freer market, not socialized medicine and a skyrocketing deficit.



Table 2: Race-Explicit Message

Millions of Americans can't get health insurance. And many who had coverage, lost their insurance along with their jobs when the recession hit. Having health insurance once meant having security, but not anymore.. With insurance companies capping benefits for diseases like cancer, we're all one tumor away from financial disaster, no matter how good we think our insurance is. We shouldn't have to worry that if we change jobs we'll lose our insurance or our doctor.

The health care problem facing Americans cuts across class, race, and ethnicity. It can affect any of us at any time. A heart attack.

A child with asthma. A bad back. To an insurance company, just another "pre-existing condition."





This isn't about illegal immigrants, it's about American citizens. It isn't about welfare, it's about people who work for a living and still can't afford insurance—or who lost their insurance when they lost their job. It isn't about color, ethnicity, or gender. White men are losing their jobs in record numbers, and black and Latino Americans tend to have lower-paying jobs and can't afford insurance no matter hard they work.

Is this really how we want to reward work in America? It doesn't matter whether you make \$25,000 or \$250,000. It shouldn't be up to insurance companies to decide who to cover, what to cover, and how much to charge for it.





People who work for a living ought to be able to take their kids to the doctor when they're sick. It's that simple.



SUBPRIME LENDING MESSAGES: CONSERVATIVE VERSUS RACE IMPLICIT/EXPLICIT

Table 1: Conservative Message

The economic downturn we've experienced is the worst in generations. Its cause was simple: People who couldn't afford to buy homes took out mortgages they knew they couldn't afford, often pretending to have income they didn't have.



When millions of these people failed to make their mortgage payments, the housing market crashed, taking down the American economy with it. The banks couldn't absorb all of the foreclosures, and housing prices fell for the rest of us.



The American Dream is a privilege, not a right. You have to earn a home, not just sign up for one because you think you deserve it. Home ownership shouldn't be just another government entitlement program, like welfare and food stamps.



The government had no business telling bankers to ease up on mortgage restrictions. You ought to have good credit to buy a home. And people had no right to crash the economy by gaming the system. The last thing we need to slow down economic recovery is more government intervention and red tape.



Personal responsibility. That's what has always made America great.



Table 2: Implicit/Explicit Message

Since the economic crisis hit last Fall, over six million hard working Americans have lost their jobs, and millions more have had their homes and dreams foreclosed.



Meanwhile, the predatory lenders and Wall Street gamblers who risked our homes and pensions with their get rich schemes have gotten hundreds of billions of taxpayer dollars to pay off their gambling debts. The pain of losing your home doesn't come in different colors.



It feels the same whether you're White or black, Hispanic or Asian. It feels the same whether you're male or female. And it doesn't feel any better if it was the first home you proudly placed your dreams in or the home you planned to retire in.



No mother or a father should have to tell their kids they can't live in their home anymore because Wall Street bankers decided to play Russian Roulette with our financial security. We need tough new regulations to prevent this from ever happening again. If banks and credit card companies have something to say, they shouldn't be allowed to say it in the fine print, or triple our interest rates without notice.



If a rebellious kid can get 3 months in jail for shoplifting an iPod, how many years does this man deserve for stealing the homes, jobs, and pensions of millions of Americans? There's plenty of prime real estate open for him, in San Quentin.



The Center for Social Inclusion works to unite public policy research and grassroots advocacy to transform structural inequality and exclusion into fairness and inclusion for all. We work with community groups and national organizations to develop policy ideas, foster effective leadership, and develop communications tools for an opportunity-rich world in which we all will thrive.

The Center for Social Inclusion 150 Broadway, Suite 303 New York, NY 10038 (212) 248-2785 www.centerforsocialinclusion.org

© 2012 Center for Social Inclusion. Creative: Tronvig Group.

