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Research Paper

(Re)acting (to) the crisis: A comparative analysis of crisis framing in obesity, climate change, antimicrobial resistance, and the UK cost-of-living crisis

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Across human and planetary health, the concept of crisis provokes a sense of exceptionalism and sudden diversion from a supposed 'normal' state of affairs. By approaching crises as socially constructed phenomena, we open up paths of enquiry that can help us to understand what it means to promote, use, or suppress the framing of an issue as a crisis. Actors can create or exploit crisis narratives to define the crisis and specific solution(s) in their interest. Identifying and critically interrogating different crisis framings, however, represents a key challenge. In this paper, we analyse four case studies from across human and planetary health: obesity, climate change, antimicrobial resistance, and the cost-of-living. Adopting an interpretive lens to interrogate these 'crisis imaginaries', we interrogate how crises are constructed through, and reflected in, discourse. We build on existing frameworks to better develop methods to critically evaluate crisis conceptions and understand how these may drive (and be driven by) the commodification of narratives in public health. In paying particular attention to power dynamics, we demonstrate how crisis narratives may obscure longstanding inequities. We conclude by providing recommendations to better inform consideration of the drivers, trade-offs, and wider implications of crisis framing.

Introduction

It is almost impossible to participate in policy discourse without encountering crises narratives. We appear surrounded by health, social, and environmental crises; indeed, the World Economic Forum warned in 2023 of a 'polycrisis' of war, social unrest, and environmental devastation (WEF 2023). A wealth of

scholarly work is concerned with the ways in which governments can manage and mitigate such crises, presented as exogenous shocks (Asal & Beardsley 2007, He 2013, Holla et al. 2018, Ishikawa & Tsujimoto 2009). But how does an issue come to be defined as a 'crisis' in the first place? Who determines which problems turn into a crisis? And, critically, who benefits and loses when governments act on crises? Approaching crises as socially constructed rather than objectively occurring phenomena opens up paths of enquiry that can help us to understand what it means to promote, use, or suppress the framing of an issue as a crisis. In other words, it shifts the focus to the inherent 'narrativity' of crises (Hay 1999).

Crisis narratives have been used strategically by advocates and researchers to propel issues onto national and global policy agendas (Zahariadis 2016). Yet, our understanding of events or circumstances as (non-)crises and the subjective truths and knowledge this understanding is rooted in form the foundation of how we—as societies—respond (Fairclough & Fairclough 2012, Lawrence 2014). The transformation of a problem into a crisis in the public perception can drastically increase the priority it is assigned within government agendas, imploring action and shifting notions of what is or is not considered politically feasible or acceptable (Hay 1996, Hay 1999, Zahariadis 2016). For public and planetary health communities, establishing a credible crisis label can be the first step towards increasing public attention, marshalling research and advocacy funding, consolidating disparate coalitions, and repositioning previously unthinkable interventions as 'solutions'. A widely perceived state of crisis can catalyse change in favour of the public interest, overcoming inertia in a way that enables substantial policy reforms which strengthen health and environmental protections. Nathanson and Bergeron (2017), for example, document how health officials successfully harnessed attention to France's 'contaminated blood crisis' in the early 1990s to drive a major reform of the public health system, ultimately resulting in the establishment of the French FDA. Yet, while crisis episodes have the potential to stir a desire for positive structural change, such exceptional states can also legitimise policies that undermine the public interest. Just as public health communities may see the establishment of a crisis in the public's perception as an opportunity for action, vested interests may approach a crisis in the same way, particularly if there are regulatory and distributive policy prizes that may accrue from crisis labelling. Large-scale economic, political, or environmental disruption—for example, following Hurricane Katrina in New Orleans—has opened up windows of opportunity for experimentation with radical free-market economic policies and private profiteering, a phenomenon that has been termed 'disaster capitalism' (Klein 2007). Governments' contractual outsourcing of responses to successive COVID-19 crises represented a major policy prize for private sector providers, in some cases at a higher cost to public finances in the short term, and to public trust in the long-term (Hunter 2023, Mazzucato & Collington 2023). The UK government's outsourcing of core functions of its COVID-19 Test and Trace programme, for instance, led to 'serious and expensive failings' in the form of slow turnaround, inferior testing quality, and data sharing issues (Glover & Maani 2021).

The red thread linking the examples and sequelae of crisis discourse above is the power of framing, which can delineate the severity, nature, and scope of a problem, and establish what is and is not an appropriate intervention. It is therefore imperative that we develop analytical approaches for crisis framings across their full 'arc', from origins, to definition, uses, and implications. This paper aims to explore crisis framing in four case studies across human and planetary health—obesity, the cost of living, climate change, and antimicrobial resistance (AMR)—to encourage critical reflection on the potential impacts of its strategic use by a range of actors. In so doing, this article presents an approach to critically interrogating the strategic use and implications of crisis framing, emphasising the socially constructed and contested nature of crises.

Theoretical Underpinnings: Framing and the Social Construction of Crises

This article is concerned with crises as a subject of discursive construction rather than objective definition and measurement. Crises are conceptualised here in line with Hay (1999), as '[moments] of decisive intervention' rather than 'merely [moments] of fragmentation, dislocation or destruction' (p. 317). A key

factor contributing to the establishment of crisis discourse is framing, a process of sense-making that diagnoses a problem and prescribes a specific set of solutions (Rein & Schön 1996, van Hulst & Yanow 2016). Crucially, the way phenomena are framed not only focuses our attention on some aspects of the problem or possible solutions, it also shifts others into the background (Koon et al. 2016). As such, it is linked closely to mechanisms of agenda-setting, with framing as one potential tool to move issues from the ‘systemic agenda’ of the wider public to be prioritised within the ‘institutional agenda’ of governments (Zahariadis 2016).

When approaching crises as socially constructed and shaped through framing, the implications for what does and does not constitute an appropriate reaction become particularly salient. Crisis discourse, as Nordin (2014 p. 109) argues, ‘implies that action has to be taken immediately and that there is no option other than to act’; while such urgency can indeed be used to marshal support for ambitious measures to protect health or the environment, the opposite can be true and there is a risk of short-term action that may—intentionally or unintentionally—undermine the public interest. The positioning of an issue as a crisis can also shift *how* decisions are made; instruments and requirements considered essential parts of ‘normal’ policymaking may be foregone or weakened in times of crisis, resulting in changes to the levels of deliberation, accountability, and transparency in decision-making. This happened at scale during the COVID-19 pandemic, with governments globally adopting faster approval procedures with simpler forms of impact assessment, and adopting lighter reporting requirements and enforcement regimes for regulated entities (OECD 2020). While such procedural shifts may reduce administrative hurdles for new public health or environmental legislation, reduced scrutiny also has the potential to enable the introduction of regressive and harmful laws, or the weakening of existing protections.

Boin et al. (2009) attribute the drastically varying impacts of crises on politics, policy, and institutions to mechanisms of *crisis exploitation*, which manifests in *framing contests*. Differentiating between two stages of contestation, the authors posit that, first, the scale of a crisis is contested; and only when a crisis is established are cause and blame contested. What follows is that the first contest is an example of where actors are using crisis *framing*, whereas the second contest, where the crisis is established and framing contests turn to problems and solutions, is when a crisis has become part of the *discourse*. The contests relate to the notions of acting and reacting, and bring to mind Louis Althusser's (1971) interpellation of the subject; when crisis parlance is discursively deployed against another body, this constitutes an interpellation, or ‘hail’, and thence the interpellated body is positioned as the subject. As a discursive strategy, interpellation allows the user to gain and exercise power in an interaction, transforming any action by the interpellated party—or the lack thereof—into a response (Glover et al. 2022).

When we interrogate how frames are constructed and why some framing efforts are more successful than others, power emerges as an important explanatory factor. Crises can be created and exacerbated by inequalities, and can themselves create or entrench inequalities (Glover et al. 2020). What is of particular interest when crisis meets inequality is how, following macroeconomic crises such as the 2008-9 Global Financial Crisis, those in the lowest socioeconomic quartiles of society have often suffered the most. Thinking through the way crises are framed, therefore, requires perennial consideration of *for whom is it a crisis*, and *whence did the crisis come*? None of the crises we discuss in this paper are new. Rather, they are all, to different extents, examples of ‘creeping crises’, slow-burn, slow-resolution issues with the potential to lay bare the limits of governance (Boin et al. 2020). For many, crises have been crises for aeons, affecting the health and wellbeing of people, communities, and even entire nations well before national media, researchers, or governments took note. Therefore, since crises are shaped by prior inequalities and power imbalances, ultimately, the people who are most affected by them may be the least able to shape the narratives which define the nature of, and reaction to, these crises.

Methods

We adopted a collective and comparative case study approach (Stake 1995), using multiple cases in order to compare across different topics relevant to human and planetary health that were areas of expertise for the authorship team. We each engaged with one of the case studies described above in-depth and ‘taught’ them to each other, drawing on Boin et al. (2009) to structure our discussions. Our exploration of crisis framing also shares an interest in problematisation with approaches such as Bacchi’s (2009) ‘What’s the problem represented to be?’. We did, however, focus on both linguistic and strategic efforts to shape policy, rather than the latent discourses underlying specific government policy. Our investigation is subdivided into Boin et al.’s two framing contests, first over the significance of the events in question and, if a crisis is established, over causality and responsibility. These contests are not necessarily linear in time, as these processes occur and reoccur, overlap, and unravel.

Guiding questions	
Contest 1: Establishing the crisis	
Discursive origins	Where did crisis framings (or framings) originate and in which context?
Actors	Which actors use (or promote) the crisis framing(s)?
	Which relevant actors do not use (or oppose) the crisis framing(s)?
Objects and subjects	Who is being positioned as the subject of the crisis?
	Are responsible actors or institutions identified or is the crisis positioned as an “act of god”?
Contest 2: (Re)acting (to) the crisis	
Spotlight and shadows	Which problem drivers are shifted into the spotlight by the crisis framing?
	Which (and whose) solutions are shifted into the spotlight by the crisis framing?
	Which problems/ solutions are shifted into the shadows by this crisis framing?
Winners and losers	Who stands to benefit/ lose from proposed solutions?

Table 1: Analytical framework, concatenating and extending Boin et al.’s contests and Bacchi’s questions into a tool to critically interrogate crisis framing.

Case Study Design

We selected our four case studies on crisis framing in Autumn 2022, in the context of four contemporary public and planetary health issues, (1) cost-of-living, (2) obesity, (3) antimicrobial resistance (AMR), and (4) climate change, drawing on policy documents, our empirical research, and high-profile national and international media coverage across all four cases. All four authors drafted their cases guided by the questions set out above, read and reread all cases and taught their cases to one another, while two of the three remaining authors would ask questions and draw out similarities or differences among the cases, while the fourth would note-take. Each author took on each role, with REG and KL leading on note-taking, facilitating, and consolidation. In so doing, we specifically interrogated how and where the construction of different issues as a crisis originated and how it developed over time, how different actors use or refute it, and how this might shape policy responses. Finally, we related our reflections to previous empirical and theoretical contributions on the critical analysis of crisis framing. We first synthesise

existing knowledge on each of these crises and then move on to offer comparative reflections across cases.

Findings

The UK 'Cost-of-Living Crisis'

Contest 1: Framing the Crisis

The conditions in which people live—shaped by inequities in resources and power—are deeply connected to physical and mental health, with life expectancy drastically cut short in the most deprived areas (Marmot 2015). The term 'cost-of-living crisis' has emerged as the most common descriptor for the acute financial problems facing the British public since 2022. The term was used, though sparsely, in news reports as far back as the 1980s, but in the aftermath of the Global Financial Crisis, the term was brought into the mainstream by then UK Labour party leader Ed Miliband in a February 2011 speech that warned of the devastating impacts the Conservative government's austerity measures would have on individuals' lives and on worsening inequality (Rigby 2011). Between 2011 and 2014, the term gained in popularity, predominantly with opposition politicians who invoked it in the context of concerns such as fuel and housing affordability in the UK, and the rise of food banks (Johnston 2014, Wright 2011). After initial signs that Britain's economic situation was improving, the cost-of-living crisis was declared 'over' (Hawkes 2015, Parker & Pickard 2015). Recent (2022-24) public discourse centred extreme increases in the cost of essential goods and services, fuelled particularly by spiralling energy costs, price increases for essential goods—driven by COVID-19, Brexit, and Russia's war on Ukraine—and inflation rising to the highest levels in 40 years while wages, especially in the public sector, have stagnated. During this period of uncertainty, new political leaders emerged; they saw an opportunity to launch a radical economic experiment. With as many as 60% of UK households estimated to face fuel poverty in autumn 2022 (Bradshaw & Keung 2022), there was immense pressure on then newly appointed (and shortly thereafter replaced) Conservative Prime Minister Liz Truss and Chancellor of the Exchequer, Kwasi Kwarteng, to act ahead of what promised to be a challenging winter.

Contest 2: (Re)acting (to) the Crisis

In a 'mini-budget' on 23rd September 2022, the Truss government announced their response: introducing tax breaks for the wealthiest, regressive fuel caps, and a freeze on many public sector salaries while removing the cap on bankers' bonuses, thus placing the UK on track to become the 'most unequal country in Europe' and prompting a market response that may have damaged the UK economy 'beyond repair' (The Economist 2022). The UK cost-of-living crisis opened a window to propel regressive taxation, and fiscal and monetary policies that disadvantage the same parts of the population who had been most impacted by austerity, thus consolidating and compounding inequalities (Morris et al. 2023, Onaran 2023). These policies might have been proposed in a different context, however they may not have been politically viable without being presented in the context of the cost-of-living crisis. Following a tumultuous three weeks and the appointment of a new Chancellor of the Exchequer, Jeremy Hunt, the majority of these measures were scrapped in an attempt to appease the markets, but with the UK in recession, previously unimaginable measures to further reduce public spending remained on the horizon. Despite a more stable political climate in winter 2023, UK inflation remained above 5% and the WEF Global Risk Report (WEF, 2023) highlighted the cost-of-living crisis as the most severe global risk in the short term, at the same time as Oxfam reported unprecedented rises in wealth for the richest—the 'winners' of recent crises, the richest 1% which captured almost two thirds of all new wealth since 2020

(Christensen et al. 2023). Both organisations link this issue to a growing risk of 'polycrisis', which the WEF frames as connected to demand and supply of natural resources, and Oxfam as inherently tied to rising global inequalities exacerbated by tax regimes which allow wealth to multiply while taking from stagnating salaries.

The focus on cost narrows the conceptualisation of the problem, away from more systemic issues such as low wages, crumbling public services, and the widening inequality gap, and toward short-term, individualised actions and reactions, which come at the cost of measures which address the underlying drivers of inequality and such temporary solutions risk becoming the norm. Some poverty charities, for instance, have raised concerns that 'warm banks' could become as omnipresent as food banks—once a temporary fix—have more recently become in the UK (Brooks 2022).

The 'Obesity Crisis'

Contest 1: Framing the Crisis

Obesity is a preventable condition linked to a range of negative health outcomes which has tripled globally since 1975 and continues to rise in many countries (World Health Organization 2022). In England, 28% of adults and 22% of children aged 10 to 11 are estimated to be living with obesity (Stiebahl 2025). This trend demonstrates pervasive socioeconomic inequalities, with those in the most deprived areas more likely to live with obesity and thus suffer from associated health impacts (Stiebahl 2025, El-Sayed et al. 2012a, El-Sayed et al. 2012b). Few countries have successfully slowed the growth in obesity rates (World Obesity 2025). The UK has made little substantive progress despite the publication of 14 national UK obesity prevention strategies and the proposal of 689 policies (Theis & White 2021). Initial uses of the now ubiquitous term 'obesity crisis' in the mid 1990s focused on discussion of the aetiology of obesity among rapidly rising prevalence, and then shifted to include calls for effective policy and clinical interventions. In the UK, the popularity of the term began to rise in 2004 and peaks in use coincide with the publication of national obesity strategies such as the Labour government's 'Choosing Health' and 'Choosing a Better Diet' strategies in 2004 and 2005 (Department of Health 2004, 2005). In media reporting, obesity crisis narratives have been used irrespective of political leanings. During the mid-late 1990s, heavily sensationalised reports conveying stories on severe morbid obesity and resulting extreme outcomes were common, often adopting an individual responsibility narrative that emphasised people's behaviour and habits as the main causes of obesity. The 2000s saw continued alarm about the rapid rise of obesity, accompanied by a slight shift to increased provision of dietary information and weight loss tips.

Contest 2: (Re)acting (to) the Crisis

Although crisis framing has likely helped raise obesity onto the political agenda and into the public discourse, its often individualising use has been criticised as contributing to the stigmatisation of people with obesity rather than promoting healthier environments (Moffat 2010). This is exemplified in oversimplified media framings of obesity as a health crisis resulting from individual failings, evident in a recent claim by a commentator in *The Times* that 'fat shaming is the only way to beat the obesity crisis' (Parris 2022). While there is some indication that academic narratives have shifted from a focus on the individual towards an increasing emphasis on social determinants and food environments, this is not replicated in UK obesity policy, where neoliberal ideology has played a clear role in shaping policy, resulting more often than not in individually-focused approaches such as education campaigns or behavioural nudge-style policies, instead of tackling structural drivers of obesity. Both these narrow interventions and the rarer regulatory approaches were, at times, justified by invoking the urgency of an 'obesity crisis'. Similarly, the public health community has drawn on the same concept, or the related

'epidemic' framing in criticising the UK government for failing to acknowledge the wider determinants and implications of obesity.

After the 'obesity crisis' framing had permeated into the broader public discourse, the food and drink industry began using the term in their communications. By 2010, it appeared that many major food companies had adopted the terminology in their social marketing practices, primarily linking it to causal narratives that focused on the role of physical activity (rather than diet) in the development of obesity. Advocates' adoption of crisis terminology has been variable, which may be a symptom of ongoing debates over the use of the term obesity to refer to a multifaceted, complex problem that is but one outcome of a dysfunctional food system. Since 2019, the popularity of the term appears to have declined, which may be partly attributable to the dominance of COVID-19 within the public discourse. Academia has consistently used crisis terminology concerning obesity and in the past five years, the term has been more heavily tied to demands for tougher policy action, the impacts of obesity on health inequalities, and its interactions with COVID-19 (e.g., Cuschieri & Grech 2020, Lobstein et al. 2004). Alternative crisis framings in the context of diet and obesity have commonly drawn on medicalised language, for instance, in labelling the issue an 'epidemic' which is as, if not more, commonly used (WHO Regional Office for Europe 2022, World Health Organization 2024). Crisis framings have also been used to tie together existing crises, such as the 'global syndemic of obesity, undernutrition, and climate change' (Swinburn et al. 2019), in order to encourage urgent multisectoral and whole-of-society action.

Despite the common use of the term across academia, advocacy, and media, the UK Government had rarely referred to obesity as a crisis in any official prevention strategies until David Cameron referred to the 'obesity crisis' when discussing the 2016 childhood obesity action plan (Department of Health and Social Care 2016) and the proposal for the Soft Drink Industry Levy, likely to legitimise and gain support for what was considered a controversial policy for a Tory government fuelling accusations of 'nanny statism'. After the end of Cameron's prime ministership in 2016, 'obesity crisis' rarely appeared in government messaging. More recently a framing around collective responsibility, as exemplified by Boris Johnson's 2020 'Tackling Obesity: empowering adults and children to live healthier lives', encouraged individual weight loss efforts to support the health service in advance of a fast-approaching second wave of COVID-19 (Department of Health and Social Care 2020). Although the strategy included several policies considered upstream (for example, online advertising restrictions for products high in fat, sugar, and salt), Ralston et al. (2023) note the persistence of individualism as the underpinning framing which positions these policies as enabling healthier personal choices.

The 'Antimicrobial Resistance Crisis'

Contest 1: Framing the Crisis

Antimicrobial resistance (AMR) has been conceptualised as a crisis in recent years. This was initially by government, then academics, and latterly industry. AMR refers to when a drug that used to successfully treat a bacterial, viral, fungal, or protozoal infection no longer works as well, or at all, due to the fact that the infecting organism has evolved, and has stopped being vulnerable to it. It has been estimated that the global and directly attributable mortality due to AMR is 1.27 million annually (Murray et al. 2022). Over the last decade, AMR has been represented by many actors (policymakers, governmental actors, industry, charities, academics, others) as being a crisis, or the 'next COVID-19', or a 'silent pandemic' that will end modern medicine as we know it (Glover et al. 2022, O'Neill 2016).

In 2011, England's then new Chief Medical Officer, Professor Dame Sally Davies, commissioned her first annual report on the global risks of AMR. Subsequently, the UK Department of Health and Social Care (formerly the UK Department of Health) published the 'Five-year antimicrobial resistance strategy to combat the decreasing effectiveness of antibiotics, antivirals, and antifungals, 2013-2018', a world-leading, ambitious plan (Department of Health 2013). In 2018, as the UK Government was

'refreshing' their AMR Strategy, the Health and Social Care Committee of the UK House of Commons called for written evidence submissions, asking respondents to address two main questions: what results had been delivered by the UK AMR 2013-18 Strategy; and what should be the key actions and priorities for the Government's next AMR strategy. Crisis narratives were used in particular among pharmaceutical and medical technology industries in order to lobby for deregulation, request subsidies and incentives, and request the roll-out of a Subscription Model as a novel mechanism of valuing antibiotics (Glover et al. 2022).

In parallel with much of this domestic work, the UK championed the introduction of an AMR resolution at a high-level meeting of the General Assembly of the United Nations (UN) in 2016 and again in 2024. The UK also brought the topic of AMR to the G20 in Berlin in 2017, and the G20 published in June of the same year a declaration with a stated commitment to helping countries without AMR policies to develop them (WHO 2017). In 2017, only a third of countries worldwide had a national action plan to combat AMR. By mid-2018, this was over half (The Fleming Fund 2023). AMR again was on the 2022 Health Ministers' G7 agenda, with a particular focus on how to incentivise the pharmaceutical industry to respond to AMR. Even in UK government press releases about the event, the language was crisis-laden, describing the 'commitments made by health ministers to tackle the silent pandemic of AMR' (Department for Health and Social Care 2022).

Contest 2: (Re)acting (to) the Crisis

With the use of a technocratic 'crisis' narrative, AMR swiftly rose to the top of the global infectious disease research and policy agenda and from 2014 onwards has received high levels of attention, funding, and political and policy commitments and attention worldwide. COVID-19 changed the AMR research agenda. Where, before the pandemic, AMR captured the attention and imagination of the G7, the G20, and the WHO across a wide range of solutions such as better sewage, better prevention and control, and improved surveillance systems, the pandemic subsumed global infectious disease discussions for years. Now, AMR colleagues seek to reposition the collection of conditions as an extension of 'pandemic preparedness'; the US PASTEUR Act, the UK Subscription Model, and pandemic treaties all describe AMR in a post-COVID-19 world as a 'silent' or 'slow' pandemic that, if brought to its so-called logical conclusions would be the end of modern medicine as we know it. AMR policy solutions now seem concentrated only on one or two neoliberal economic domains: the Subscription Model, and Transferable Exclusivity Extension (Vouchers) to incentivise industry to develop new drugs. Diagnostic incentives also exist, on a smaller scale. The vast majority of AMR spending in the UK and abroad is now concentrated within the narrow financialised pharmaceutical and technological domains; we see that commercial interests have deployed crisis narratives to lobby for deregulation and subsidies that favour their interests (Glover et al. 2023). Alternative pathways, like government or public models of AMR solutions, are side-lined as the stage is set for the subsidising of industry-led solutions.

The 'Climate Crisis'

Contest 1: Framing the Crisis

Climate crisis terminology has been increasingly used to describe the effects and nature of anthropogenic climate change. The term has been used sporadically since as early as the late 1980s (Center for International Environmental Law 1990), and likely came to greater prominence among advocates when used by Al Gore in the influential 2006 documentary film 'An Inconvenient Truth'. In May 2019, the Guardian published an update to its style guide in which it announced a change in the language with which it describes environmental issues. Instead of 'climate change', the preferred terms would be climate breakdown, crisis, or emergency (Zeldin-O'Neill 2019). Instead of 'global warming', there was a

preference for the term ‘global heating’, reflecting a change in wider language on the topic emerging over the previous 12-18 months. In August 2018, a perspective paper, which became one of the most cited climate science articles of the year, had outlined in stark terms the risk of self-reinforcing feedback loops that might soon reach a threshold event or tipping point, beyond which the planet would not recover, even if emissions were subsequently reduced (Steffen et al. 2018). That September, the UN Secretary General, when speaking of the moral duty of the world’s richest countries, stated they were most responsible ‘for the climate crisis’ (United Nations 2018).

The term ‘climate crisis’ has since increasingly entered public discourse, and featured in the final language of the Sharm El-Sheik implementation plan announced following COP27 (UNFCCC Conference of the Parties 2022). In absolute terms, though, the term remains far less frequently used than ‘climate change’ (based on authors’ own Google Trends analysis). A range of similar terms have come to be used to describe the same or similar concepts in recent years, such as climate ‘emergency’, ‘catastrophe’, or ‘breakdown’. There are those who claim the increased use of the term reflects scientific accuracy, and that policy and scientific debate regarding climate change, in light of its implications, has been by definition conservative in estimates and future predictions (Spratt & Dunlop 2018), thereby understating an existential risk. Lewandowsky et al. (2015) have described the ways in which these biasing effects have led to underplaying of the degree of confidence scientists hold about threshold effects, or linkages between climate change and extreme events such as heat waves, heavy rainfall, hurricanes or drought. This ‘self-censorship’ or ‘endemic bias’ has been described as a feature of IPCC assessment reports which, in the 2010s, were said to ‘err on the side of least drama’ and ‘underpredict or downplay future climate changes’ (Brysse et al. 2013, Lewandowsky et al. 2015). The role of the fossil fuel industry in fostering doubt about anthropogenic climate change forms an important element of contestation in this context. Analysing ExxonMobil’s communications on climate change, Supran and Oreskes (2021) note the ways in which the more neutral ‘climate change’ was increasingly preferred to ‘global warming’ in sponsored advertorials, with climate change itself often framed as a risk rather than a reality. In addition to continuing to deny climate science or climate change itself, some blogs and conservative think tanks with donor links to the fossil fuel industry have directly contested the use of more urgent crisis framing and related terms (Coan et al. 2021, Revkin 2009).

Contest 2: (Re)acting (to) the Crisis

The climate crisis framing emerged in advocacy circles but has increasingly been adopted by scientific and media outlets as a more accurate reflection of current trends, and as a counterpoint to what has been considered an overly conservative view of the implications of anthropogenic climate change. The nature of the climate debate, and in particular the role of powerful vested commercial interests who have clearly sought to influence both the evidence base and the framing of these issues, mean that there is an active and dynamic contestation regarding prevalent terms and their influence on discourse and policy. The evidence suggests that use of crisis terminology in the context of climate change is growing, but that translating the urgency implied by such terms into action requires a corresponding framing of hopeful solutions to maximise public support and political engagement. In parallel, it is likely that as such movements grow and propagate, they will face increasingly direct opposition from the fossil fuel industry.

Discussion

Crises can be established in the public discourse through a range of pathways. They can appear acute and neatly bounded, as in the ‘cost-of-living crisis’, emerging after drastic expansions of cost-of-living concerns to large parts of populations, or perennially badged as a crisis, such as in AMR, to remind lay audiences of its importance. However, across the four crises analysed here, we see advocates push the

term into the mainstream in an attempt to lend urgency to a latent threat, and, subsequently, increasing civil society support. These efforts have critical risks.

Crisis Framing as an Agility Risk

An important aspect for consideration by those using crisis framings in the context of slow-burning public policy issues, such as obesity, are agility risks. Boin et al. (2009 p. 82) observe that 'disruptions of societal routines and expectations open up political space for actors inside and outside government to redefine issues, propose policy innovations and organizational reforms, gain popularity and strike at opponents' (p. 82). What, then, does this mean in policy arenas that are characterised by stark resource imbalances between public interest groups, powerful commercial interests, and radically neoliberal governments? This imbalance was of particular note in both the climate change and cost of living cases.

Those advocating for transformational change in public health and environmental policy may frame an issue as a crisis in the hope of justifying structural interventions, such as in AMR, however the comparably greater resources available to major commercial and political entities may make it hard to maintain momentum as the contest over problem definition evolves. In other words, commercial actors are often more agile, and able to devote more resources to attempts to shape and provide policy 'solutions', particularly in the context of lacks in public sector capacity. This means that intentional decisions to frame a policy problem as a crisis should not be taken lightly; fostering urgency may ultimately create opportunities that are harnessed by others who move more quickly and aggressively.

The 'Crisis Ladder'

Comparison among our case studies indicates a 'ladder' in the use of the crisis metaphor, with several discursive strategies used to establish and escalate a crisis. Attempts to escalate the urgency of non-communicable diseases, for instance, often draw on infectious terminology. Non-communicable disease trends such as obesity have become 'epidemics', which can in turn be discursively escalated to 'pandemics'. In infectious disease domains, where criteria for pandemicity are not met, such as in AMR, we still see such terminology being used. We also see this effect in other public policy domains not examined in our paper, including notable examples of opioid and firearm 'epidemics' in the USA. The concept of a 'hidden threat' is also being used to escalate crises, and can be added on to pandemic imaginaries. In AMR, the 'silent pandemic' imagery serves both to link AMR to the COVID-19 pandemic in terms of scale of global crisis but also serves to amplify it by virtue of its intractable, invisible nature. Invisibility serves discursively to increase the notion of risk, and risk discourses have (as previous Foucauldian analyses belabour) become institutional, formal ways of describing diseases, lending themselves to institutional, power-laden solutions (Foucault 2008, Mabhala et al. 2020). From 'emergency' to 'crisis', from endemic to epidemic, from epidemic to pandemic, from 'slow pandemic' to 'fast pandemic', and from 'trackable' to 'hidden' or 'silent', there were amplifications of crises described throughout our case studies that served to demonstrate the existence of a 'crisis ladder', which discursively amplified the scale of the crisis to obtain political, bureaucratic, or financial attention. It is also notable that, while climate crisis terminology conveys a sense of urgency, it de-centres the role of commercial actors, a crucial cause of the crisis itself, and often implicated in ongoing efforts to dispute its severity, sow doubt and undermine political will.

Inequities

An uncomfortable reflection is that within dominant, 'successful' narratives, equity appears not to be compelling enough to supersede economic, industrial, infectious, or personal responsibility narratives. Put another way, while equity is a key component of each case, equity is alone not discursively strong

enough to align problems with solutions or action; the identification of a crisis transforms any intervention, or lack thereof, into a re-action. Across the four cases discussed in this article, what emerges as a core function of crisis framing is its (de-)legitimising potential. The urgency that comes with the positioning of an issue as a crisis, and thus as exceptional, can legitimise interventions that would not normally be considered appropriate, such as immense subsidies for the private sector or restrictions of personal freedoms. This exceptionalising function can also de-legitimise processes designed to ensure accountable and transparent public policymaking. This may simultaneously delegitimise everyday, grinding inequity by avoiding structural change in favour of public policy plasters. While this can sometimes work in favour of public health by reducing administrative barriers to introducing new regulations, a crisis can also open a window for harmful and inequitable decisions to be implemented quickly and with little or no scrutiny.

Conclusion

Adopting a two-stage model of crisis establishment and (re)action, we explored the social construction and contestation of four contemporary policy problems which have been variously identified as crises. Our analysis supports the notion that crisis narratives in public policy are a product of dominant voices who decide what is or is not a crisis, justifying (in)action by discursively contrasting states of crisis with 'normal' times, and harnessing the legitimising functions of crisis framing for political/financial gain. We further build on the work of Bacchi (2009) and Boin et al. (2009), to critically interrogate crisis narratives across a spectrum of policy areas. This work encourages deep reflection for those involved with agenda-setting in all areas of public policy. Specifically, how do researchers, advocates, and policymakers push an issue to political priority status without creating problems down the line? Moreover, how can crises be pursued without compounding existing inequities within a domain? Can pro-equity crisis framings be successful at advocating for change among groups with multiple interacting equity harms, or does this always require (at best) allyship, and (at worst) co-opting or distorting of the crisis by establishment or those with power? And finally, what is the opportunity cost of strategically establishing a crisis; what do we shift into the shadow by adopting, promoting, and privileging certain framings? A larger reflection is that labelling a specific event as a crisis rather than as a symptom of underlying inequalities risks 'warping' time in a way that casts a shadow over the cross-cutting nature of worsening inequalities in many societies.

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Conflicts of interest

The authors have no conflicts of interest to declare.

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