Minority Nurses in the News

A content analysis of one year’s newspaper coverage of four groups of nurses—racial minorities, males, foreign-trained nurses, and midlife entrants to nursing—reveals the image of each that is projected to the public.

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Knowledge of the image of minority nurses that is projected to the public via the mass media is crucial to the advancement of these groups. To determine the image of minorities in nursing as it was expressed in American newspapers in 1978, we asked the following questions:

• Where and to what extent are minority nurse groups made visible to the public through the newspapers?
• To what extent do minority nurses differ in terms of news coverage as contrasted with other nurses?
• What is the nature of the newspapers’ profile of minorities in nursing as a whole?
• What are the unique issues being conveyed to the public about each separate minority group?

STUDY METHODS

Content analysis—a technique for making inferences by objectively and systematically identifying characteristics of documents or other communications—is the basic research methodology we used.1 We employ a clipping service which subscribes to every daily and weekly newspaper published in the United States and identifies and clips all articles about nurses and nursing that meet the study criteria. We also use two instruments—a news analysis tool and a photograph analysis tool—that were developed and tested for use in this project.

Four groups of nurses receiving coverage in 1978 newspapers were classified under the general category of minorities in nursing. These were: racial minorities (Hispanics, Blacks, American Indians); foreign-trained nurses; males, and midlife entrants to nursing (between 30 and 50 years of age).

The first thing we noticed was the paucity of news reports on minorities in nursing. Of the 3,127 news articles in the sample, only 81 (2.6 percent) focused on minority nurses. But despite this, it was possible to determine statistically significant differences among stories on minority nurses compared to each other as well as between those on minority nurses as a whole compared to stories on other nurses. We complemented these findings with a qualitative analysis of the recurrent themes found in newspapers for each of the four minority groups.

The frequency of news coverage varied significantly in different regions of the country ($\chi^2 = 44.42$, df = 8, $\epsilon = .35$, $p < .01$). Minority nurses appeared least often in news stories in the East-South Central states (Alabama, Kentucky, Mississippi and Tennessee). The few relevant articles that were published in this region focused exclusively on male nurses. In terms of individual states, California ranked highest with the greatest number of articles ($N = 23$); it was also the only state where the majority of reports concentrated on foreign nurse graduates (39.1 percent). New York ranked a distant second ($N = 7$), and its minority news coverage was con-
cerned predominantly with males (44.4 percent) and foreign nurses (38.3 percent). The extensive coverage of foreign nurses in California was not a random event since it led the nation with the highest frequency of news stories expressing concern over nurse shortage. The recruitment of foreign nurses to solve that problem also functioned to make the issues surrounding the use of foreign-trained nurses a matter of public interest.

Viewed collectively, stories on minorities in nursing tended to have a lower level of public exposure than other nursing articles. In terms of publication frequency, 63 percent appeared in daily newspapers compared to 69.4 percent for other nursing stories. However, with the exception of foreign-trained nurses, minority nurses tended to appear more frequently in newspapers with circulations below 50,000 and were essentially a phenomenon of local news reporting. These findings indicate that minority nurse articles generally are both few in number and unlikely to reach a large audience.

**PROFILE OF MINORITY NURSES**

Several personal characteristics were frequently highlighted by the press. For example, although midlife entrants to nursing are considered a minority group, photographs accompanying articles on minority nurses showed relatively young nurses (between 24 and 35 years of age) significantly more often compared to those accompanying other nurse articles (\(x^2_{df}=14.68, df = 4, \phi = .24, p < .005\)). Analysis of news photos also revealed that, in contrast to the rest of the sample, minority nurses were never shown in the role of beauty object, displaying negative emotions, or assuming submissive postures to others.

Physical attributes were mentioned more often in articles concerned with male nurses than other nurses (\(x^2_{df}=32.71, df = 1, \phi = .15, p < .001\)). Closely aligned to this was the frequency with which the male nurse's personal life was introduced into a news story. A heterosexual image was emphasized by frequent references to such masculine characteristics as large stature and physical strength as well as to the male nurse's wife and children.

The educational levels of minority nurses were reported about as often as those of other nurses. But earned degrees in higher education (baccalaureate and above) were cited markedly more often in articles on male nurses than in those on other minority group nurses (\(x^2_{df}=16.54, df = 3, \phi = .45, p < .001\)). The only two minority nurse articles reporting nurses with doctoral degrees were both on males. Stories on foreign-trained nurses dealt exclusively with diploma education, while racial minority nurses were portrayed as registered nurses only and were not linked with licensed practical nurse or nurse's aide groups.

Minority nurses expressed positive personal attitudes toward nursing as a profession significantly more often than did their nonminority colleagues (\(x^2_{df}=13.46, df = 3, \phi = .12, p < .004\)). Only five articles included mention of the professional relationship between minority nurses and physicians (four male nurses and one racial minority nurse). In each case, the nurse was shown in a subordinate rather than a collegial role. Positive relationships with hospitals were also more apparent in articles on minority nurses (\(x^2_{df}=8.61, df = 2, \phi = .35, p < .02\)). Minority nurses' relationships with patients were noteworthy in that, unlike other nurses, they were never once portrayed as being harmful in any way to patients or their families.

All professional nursing activities mentioned were categorized as either "traditional" or "progressive." Traditional nursing activities included technical skills and supportive comfort measures, while progressive activities included nurse interactions with patients and their families and utilization of the nursing process.

Traditional activities appeared significantly more often in minority nurse articles than in non minority nurse articles (\(x^2_{df}=3.84, df = 1, \phi = .04, p < .05\)). Progressive activities were chiefly reported in connection with male nurses; very few racial minority nurses and no midlife entrants were shown engaged in progressive nursing activities. The traditional activity theme was reinforced in photos showing the minority nurse using traditional equipment such as a syringe. Such objects appeared more often in pictures of minority nurses than other nurses (\(x^2_{df}=39.45, df = 6, \phi = .05, p < .001\)).

Male nurses were the only minority portrayed interacting with patients, engaging in administrative activities, or participating in patient education. The only article about a nurse assuming expanded clinical responsibilities concerned a male nurse.

Foreign-trained nurses, on the other hand, were the only minority group shown performing nonnursing activities. They were reported as ascribing this to problems of licensure in the United States and the consequent restrictions on their job responsibilities. Another explanation is that they tend to define the scope of their professional practice differently than do many of their American counterparts.

The traditional activity theme was underscored by the fact that minority nurses were pictured more often in institutional rather than community settings (\(x^2_{df}=20.63, df = 2, \phi = .08, p < .001\)). Similarly, the focus of care associated with minority nurse stories was usually restorative rather than preventive.
RACIAL MINORITY NURSES

The major themes contained in the news stories about racial minority nurses were the lack of health care for minority populations (especially care that recognized the unique needs of certain culture groups); the under-representation of racial minorities in the nursing profession; and the problems of recruiting and retaining minority nurses in educational programs.

For example, one article in a California newspaper described the great need for bilingual nurses to provide health care to Spanish-speaking groups at the same time that local high school counselors were steering young Hispanics away from college preparatory classes.5 As a result, many students found themselves lacking the credits they needed for admission to schools of nursing. The organized effort of the Chicano Nurses' Association was projected by the newspaper as a potent force for remedying this problem by arranging for career counseling in local high schools. In other California news stories, Hispanic nurses, in collaboration with other citizens, were reported to have persuaded the administrators and nursing faculty at Evergreen Valley College to open a special two-year program offering bilingual nursing education.3-4

In terms of the American Indian group, the news media pointed up the need to integrate the role of traditional native healers (shamans) into the professional health care system. American Indian nursing students in Tuscon, for example, told the press that their formal education had not altered their respect for traditional Indian health care and suggested it would be extremely beneficial to American Indian populations if native practitioners were invited to collaborate in their care. They pointed to the notoriously high turnover rates among "Anglo" physicians and nurses working with various native Indian people as well as their lack of understanding of the Indians' symbolic expressions of their health needs. The newspapers also called attention to the extreme shortage of American Indian nurses by highlighting the graduation of the first five nursing students from a community college on the Pima Indian reservation, where only five indigenous RNs had been employed at the local hospital since 1961.5

The newspapers' composite profile of black nurses contrasted sharply with that of the other minority nurse groups. Black nurses were portrayed as having a broader range of concerns, more diverse types of professional involvement, and a commitment to improving health that reached beyond their own ethnic group. For example, one article in a Tennessee newspaper described a black nurse conducting a workshop designed to foster understanding and respect for cultural differences in health care.6 Black nurses were also portrayed conducting prenatal classes and providing safe abortion counseling to the poor in Texas and Pennsylvania, and caring for house-bound indigent, aged people in a rural county of Alabama.7-9

Hispanic, American Indian, and foreign-trained nurses were depicted in newspaper stories as working only through conventional channels to try to change their situation, but black nurses were shown participating with white nurses in strikes to upgrade salaries and working conditions.10-11 Reinforcing this image of assertiveness was an article on a black mental health nurse in Houston, Texas, who led a workshop for nurses called "You can be aggressive or assertive—or miserable."12 Political and professional leadership at the national level were also elements of newspaper portrayals of black nurses. Contributing most to this image were reports on the activities of Barbara Nichols, ANA's first black president.13-14

One area in which contradictory images of blacks in nursing emerged dealt with education. A reporter for New York City's Amsterdam News cited the 1985 educational proposal of the ANA as particularly harmful to black nurses, predicting that the increased costs required to meet the minimum baccalaureate degree requirement for practice as a professional nurse would close out those individuals who could least afford it—black LPNs.15 However, no black nurse was quoted to support his opinion; in fact, other newspapers reported that black nurses were actively supporting the proposal.16-17

FOREIGN-TRAINED NURSES

The dominant image of foreign-trained nurses projected in the newspapers in 1978 was a complex montage of frustration, anger, vulnerability, and growing self-assertion. Compared to other articles on minority nurses, the reports on foreign-trained nurses consisted more of "hard" news stories rather than feature articles
Foreign-trained nurses were the only nursing minority depicted as providing an immediate, although often only temporary, solution to the nurse shortage problem in the United States. They were described as representing an inexpensive source of skilled labor. There was a high political content to the stories about this group that focused on licensure issues, immigration legislation, and their efforts at collective organizing. Although foreign-trained nurses had been energetically recruited in their homelands by American health agencies to fill shortage gaps and assume positions unpopular with American nurses, such as those in nursing homes or on midnight shifts in hospitals, they were described as ill-informed about professional licensure requirements and related immigration laws. Anger, frustration, and feelings of being exploited were the most frequent reactions these nurses conveyed to reporters. They claimed that their lack of knowledge about the requirements to practice was the result of misinformation provided by recruiters. High failure rates on state board exams and waiting periods to sit for these exams forced these nurses to take low-paying jobs as nursing assistants. To add to their frustration, the majority of newly arrived foreign-trained nurses were portrayed as in imminent danger of deportation because of their alien status. 

The image of unlicensed foreign-trained nurses presented to the public was one of questionable competency and therefore potential hazard to patient welfare. For example, the Texas Nurses’ Association was reported as stating that: “Dangerous nursing care is condoned and legislation is needed to do away with current dangerous practices permitted in Texas through the use of unlicensed, unqualified nursing personnel . . . Unqualified nurses are coming from Ireland, the Philippines, and India. . . . If they are not professional nurses, then the patient is not getting the services he is paying for.”

MEN IN NURSING

No matter where they appeared, newspaper stories on men in nursing were usually focused on countering an image of effeminacy. As mentioned earlier, physical characteristics and personal lives were much more likely to be mentioned in news reports on male than on female nurses—exactly the opposite of the traditional newspaper practice of emphasizing female physical traits. Typically, the physical characteristics issue was addressed blatantly. For example, an article in a Walden, New York, newspaper was headlined “Masculinity Is Unaffected by His Role as a Nurse.” Similarly, another article in a Columbus, Ohio newspaper began, “When 5 foot, 11 inch, 210-pound Bruce Andrews barrels down the sixth floor hallway of Mt. Carmel Hospital and gives an order, patients and nursing staff listen.”

The emphasis in these articles and others was on the seeming dichotomy between traditional maleness and the role expectations of a nurse. Frequently mentioned was the fact that men have to withstand a certain amount of teasing after they decide on nursing as a career—that is, jokes about wearing white stockings and caps. It was typical to find at least one paragraph about the male nurse’s marital status and number of children—the message intended obviously being that male nurses are heterosexual. A staff nurse in Georgia was quoted as telling a reporter, “A lot more men would probably go into nursing if they weren’t so afraid of . . . being called homosexual.”

In a related way, identity problems were also often noted, as in one newspaper story that reported a male nurse saying: “A lot of people think I’m a doctor when I come in, or if I’m carrying a tray that I’m the chef.” Mention of a military background was common—a link-

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require less intellectual capability, leading the reader to conclude that nursing is a "lesser" profession (for women as well as men).

But newspapers also reported many positive statements made by men about choosing nursing as a career. A graduate student in the nurse-practitioner program at the University of Rochester explained his motivation for entering the field: "Nursing is the one (profession) where you deal with... (the) physical, spiritual, and psychological needs (of people). To me... medicine acts... to eradicate a disease state... but nursing gives you the time to sit down with people and really care for them."

And another male nurse was quoted as saying, "I take home more than a paycheck. I see people come in ill and leave in good health. It's rewarding."

Despite these positive comments, several problems emerged repeatedly in the news about men in nursing. They included lack of acceptance by some nurses, patients, and physicians; working in a largely female environment; and low pay.

In terms of relationships with female nurses, some degree of distrust was manifested on both sides in statements such as, "If he can't work under women supervisors, he probably shouldn't be a nurse"; and "I don't mind a woman doing a man's job and getting paid for it, but don't cop out on anything heavy or distasteful. Equal rights, equal levels."

With regard to patient acceptance, a large number of articles quoted men nurses as saying that some female patients—especially middle-aged ones—asked for the "real" (female) nurses to take care of them. However, just as often, newspapers reported, patients seemed to respond better to the voice of authority when the source was a male rather than a female nurse, and some male patients were reported to have declared they preferred being taken care of by male nurses.

Reported reactions of physicians to male nurses varied from indifference to surprise and an inability to get used to the fact that the male nurses were not medical students or orderlies. Several male nurses told reporters they felt that their presence in the profession would help change the relationship between the physician and the nurse: that the nurse would no longer be considered the physician’s "handmaiden" because MDs tended to have greater respect for male nurses. One observed, "Doctors never seem to rant and rave at the male nurses the way they do with the women."

A similar message was contained in a quotation from a male nurse in Georgia: "If a doctor snaps at a female nurse for making a mistake, she might cry. I can tell a joke or something to get the pressure off."

It is unfortunate that the underlying message in these comments is that female nurses were perceived as less autonomous, and that socially learned, sex-linked behavior was considered to be inevitable on the part of all concerned.

The problem of working in a predominantly female environment was evidenced in one male nurse’s comment: "The girls’ gossip is dull, especially when they talk about their hair and what they bought. Sometimes when I’m surrounded by women continuously it gets a little tedious."

Finally, it was discouraging to note how often the problem of low pay was mentioned in terms of the traditional belief that male nurses needed higher salaries than female nurses because they were financially responsible for their family. Men in nursing "receive salaries which are lower than what they could earn in traditionally masculine professions," was the way it was expressed in one article.

Despite these problems, males were reported to be enrolling in increasing numbers in schools of nursing. At Rutgers University, male enrollment had jumped to five percent at the Newark campus and 8.5 percent at the Camden College of Arts and Sciences campus for the 1978-79 academic year. A full ten percent of the nursing students enrolled at the University of Kentucky in Lexington were reported to be male, as were 10 percent of Clark College nursing students in Vancouver, Washington.

**MIDLIFE ENTRANTS TO NURSING**

Newspaper articles about midlife entrants to nursing were chiefly "human interest" stories. Most often they focused on the problems of women with families who were trying to balance nursing studies with family responsibilities. A typical example was a story about a nurse who said that there were times when she felt as if she were going in 15 different directions at once. According to the reporter, however, when "the laundry, trash, and dishes stacked up and the pantry seemed bare,
she never lost sight of her desire to be more than a . . . model homemaker.” Midlife entrants to nursing were usually pictured as women coming from lower-middle class backgrounds who were not oriented toward college when they were high school students.

CONCLUSIONS

Taken together, our findings reveal that the press is aware of minority groups in professional nursing but that disproportionately few of their number are reported as having higher degrees. Minority nurses in general are usually depicted performing traditional nursing activities in institutional settings with a restorative focus of care, as having positive relationships with physicians and hospitals, and as being quite satisfied with nursing as a career.

Racial minority nurses are shown to be concerned about increasing their ranks in order to provide an improved quality of health care to their own groups. Black nurses are also seen in broader health care roles. Foreign-trained nurses are presented to the public as being questionably prepared, deeply embedded in the licensure problems, and having difficulties finding opportunities to practice. Men in nursing are shown as having somewhat higher educational levels than the other minority groups, having to cope with questions about their masculinity, and being involved in more progressive nursing activities and roles. Midlife entrants to nursing are reported chiefly in terms of the need to balance the heavy responsibilities of home and career.

Because newspaper reports frequently suggest that the two percent of men in nursing hold the answers to the improvement of physician/nurse relationships, poor pay, and other ills which plague the profession, the implications are, unfortunately, that the women in nursing, who constitute 98 percent of the profession, fit into the traditional stereotype of the helpless, emotional, and ineffectual female.

Based on our findings, we believe that using newspaper reportage on an annual basis to monitor minority group conditions in nursing may prove to be a useful tool. We may be able to identify precursors of change by grouping patterns and issues of similar characteristics, and quantitatively and qualitatively identifying emerging patterns. The results could be used to evaluate the success or failure of programs designed to facilitate the progress of minorities in nursing and to promote improved policy and program planning.

CITATIONS

2. San Jose, California, East San Jose Sun, May 3, 1978.