Changing how the world thinks about nursing

The Truth About Nursing works to improve the public’s understanding of the role of nurses by promoting more accurate, balanced and frequent media portrayals of nurses. This non-profit organization, based in Baltimore, has chapters in 13 countries, including Canada. Canadian Nurse spoke with Sandy Summers, RN, MSN, MPH, its founder and executive director, about her award-winning work. Summers is the co-author of Saving Lives: Why the Media’s Portrayal of Nurses Puts Us All at Risk and speaks frequently on the image of nursing and on empowering nurses to change how they are perceived.

Where did the idea for the organization come from?
In 2001, U.S. president George Bush issued his first budget proposal, calling for cuts to nursing education and community health nursing. Some friends and I in the MSN/MPH program at Johns Hopkins University school of nursing were incensed and decided to address the underlying causes of those destructive decisions.

We believed the core problem to be that nursing wasn’t valued in line with its worth, because so many did not understand what nursing is. We started talking about people’s impressions of nursing.

Obviously, TV had a huge influence. ER was one of the most popular shows at the time, and its portrayal of nurses, while positive in some ways, gave credit to physicians for the vast majority of vital nursing work.

We reached out to the producers, sending a letter to explain the inaccuracies. I then called them literally 35 times before they agreed to speak with us. In November 2001, members of our group had a one-hour conference call with an ER producer and a medical advisor. They listened to our concerns but took virtually no concrete action in response.

Frustrated by the lack of movement and the realization that the problem was much bigger than one TV show, five of our original group established a non-profit organization to focus our efforts more broadly on improving the portrayal of nurses in the media, and especially in TV and films.

We monitor news articles, songs, films and TV shows and analyze the best and worst of them on our website. We also try to influence major corporations to create more accurate images of nursing in
Taking on Dr. Oz

In 2010, an episode of The Dr. Oz Show featured a woman whose dancing regimen had helped her lose weight. The show had the woman dress up in a traditional white nurse’s outfit and perform some moves for Dr. Oz, flanked by other “nurses” who joined her in baring cleavage and “getting sexy.” When asked to apologize for displaying damaging stereotypes, the show gave a mock apology — “we’re sorry your feelings were hurt”— and had another naughty nurse depiction on the show the next week. The Truth About Nursing sent out a press release, which brought the campaign to the attention of The Associated Press and eventually to 2,200 news organizations around the world.

The media pressure resulted in another, more sincere apology in the news reports. Ever since, the show has made efforts to change how it presents nurses and nursing, with segments that spotlight nurses as health-care experts. It also invited RN Donna Cardillo to regularly blog for the show. Cardillo is a keynote speaker and columnist with more than 30 years of experience in emergency and psychiatric nursing.

Nurses should be depicted as science professionals who make critical assessments and life-and-death decisions

When taking a patient for a walk or emptying a bedpan. And I have seen vital sign machines report good numbers when patients were near death. Whether the machine is malfunctioning or not, nurses can pick up on subtle cues to detect patient deterioration and plan a rescue intervention. Unskilled workers cannot. Patients need nurses to provide nursing care.

What are the stereotypes of nurses, and why do they persist?

One stereotype is the nurse as uneducated worker. Physicians get credit for all the meaningful work we do. Sometimes, people describe nurses as the eyes and ears of physicians, no doubt thinking it’s a compliment. But it’s detrimental. Nurses are critical and analytical thinkers who solve problems and deserve credit for their organs being connected to their own brains, not to the brains of physicians.

This brings us to the second stereotype: the nurse as handmaiden who follows physicians’ commands. In reality, if nurses aren’t double-checking and questioning physicians’ diagnoses and treatments, they’re committing malpractice. Nurses usually have a better idea of how a patient is doing; their job is to protect the patient.

Then, of course, we’re all familiar with the naughty nurse stereotype, suggesting nursing is about hot young women bestowing sexual favours. In some countries, Pakistan and Bangladesh, for example, the stereotype is even more explicit —

advertising. We launch letter-writing campaigns and follow up relentlessly on the phone.

After two years of trying unsuccessfully to get ER to improve the portrayal of nursing on the show, we decided to go public. We put out a press release, and the Washington Post did a story on us that got picked up by media outlets around the world, including the Globe and Mail, the Sydney Morning Herald, the British Medical Journal, Agence France-Presse and CNN. A couple of years later, ER hired nursing advisors. They helped create a six-episode arc featuring a nurse manager with a PhD who functioned as a clinical nurse specialist, educating nurses and physicians alike about cutting-edge health care. In its final year, the main nurse character enrolled in nurse anesthetist school — a rare admission by the show that graduate nursing school exists.

Why is this work important for the profession?

First of all, public health research shows that the media affects how people think about and act toward nursing. How is the profession going to attract the best and the brightest if nurses continue to be portrayed as unskilled losers who simply fetch things for physicians?

There’s also the funding issue. When decision-makers don’t understand the value of nursing, they don’t fund it. Nursing residencies in the U.S. receive next to no support compared with physician residency programs, and less than half of one per cent of the National Institutes of Health funding goes to nursing research.

In the States, in the U.K., and I believe it’s happening in Canada, we’re seeing hospital managers replacing RNs with nursing assistants, technicians or patient care assistants. People don’t realize how much data a nurse collects
nurses are basically seen as prostitutes. Research shows that nurses suffer an inordinate amount of sexual and other abuse at work. It seems obvious that continually depicting nurses as purveyors of sexual services would be a major contributor to this abuse. And if a profession is constantly associated with female sexuality, it’s not going to attract and retain many men.

These stereotypes persist because nurses allow them to. If we don’t demand an end to the stereotypes, decision-makers will maintain the trickle of funding that makes its way to nursing, further inhibiting our ability to provide quality patient care.

**What have been some of the organization’s more successful campaigns?**

Overall, it is easier to influence advertisers than Hollywood producers. We’ve managed to get a number of ads pulled or changed that featured inappropriate portrayals of nurses, including Skechers, Schick, Coors, Dos Equis, Bloomingdale’s and Dentyne.

We’ve also had success with the public sector. In 2005, we persuaded the U.S. government to change the name of the campaign that promotes preventive health visits for minorities from “Take a Loved One to the Doctor Day” to “Take a Loved One for a Checkup Day.” In 2009, the Lung Cancer Alliance agreed to remove its Dr. Lung Love public service announcement, which used the naughty nurse stereotype to fundraise for research.

Hollywood has been much more challenging. At one time, *ER* offered pizza parties to nurses to extract story ideas out of them that it could turn into plot lines about physician heroes. *Grey’s Anatomy*, which we think has one of the most negative portrayals of nurses, refused to put any of its producers on the phone with me.

In the minds of Hollywood creators, who seem to have no idea what nurses actually do, the people who save lives are always physicians. Physicians act as script advisors and writers. And now that there are more female physicians, Hollywood seems to have decided that nurses aren’t needed to drive the romantic narratives anymore; all the main characters are physicians.

**Are there any TV shows that have done a good job of reflecting reality?**

*Call the Midwife* won our award for best media portrayal in 2012. This BBC drama, based in London’s East End in the 1950s, shows the full range of what nurses do. They work autonomously, manage complex health and psychosocial issues adeptly, and save lives. There is a physician in the show, but he remains in the background.

There are some problems with autonomy on *Nurse Jackie* — the

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**Cleaning up Scrubbing In**

Last fall, over 30,000 nurses in Canada and the U.S. spoke out to condemn the disparaging portrayal of nurses — at work and after hours — on MTV’s new reality show *Scrubbing In*.

Aided by these collective efforts, Summers found that MTV executives not only answered her phone calls but also acted upon her requests. The network moved the show from 10 p.m. ET to a midnight time slot and estimated the switch would likely reduce viewership from about 500,000 to 250,000. Further, MTV agreed to revisit some of the unaired episodes to try to add clinical scenes featuring nursing skill and expertise and to use its social media vehicles to educate the public on what nursing actually entails. Plans include “a day in the life of a nurse” website feature, which MTV will cross-promote to the 40 million people who follow its Facebook page, and a blog post on the website about what it takes to become a nurse. The website has 10 million unique visitors per month.

The network proposed that if it did more nursing programming in the future, it would consult with The Truth About Nursing on key messages and potential pitfalls. At press time, a decision about whether to renew *Scrubbing In* for a second season or to create a new series about nursing hadn’t been announced.

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**Fostering growth and diversity in the nursing profession, and strengthening nursing practice, teaching and research are our ultimate goals**
plots suggest that physicians control nurses to some degree — but, in general, the show portrays the work of a nurse realistically. The lead character educates patients, saves lives through courageous interventions, and advocates against foes — insurance companies, hospitals, physicians...

Unfortunately, the most popular American shows have also been the worst because of their continuing misrepresentation of nurses as low-skilled physician helpers who are irrelevant to serious health care.

**Why aren’t nurses used more often as sources in the media?**
Research shows that nurses are rarely quoted in health and health-care stories. When they are interviewed, it’s to provide colour rather than expert opinion for a story.

We have a lot of work to do.

Hospitals don’t usually want nurses to speak to the media; journalists seek physicians as health experts for their stories. It becomes a vicious cycle, with fewer nursing voices represented and therefore less understanding of what nurses do.

There’s also the prevailing idea that it’s better for nurses to keep their mouths closed, which likely evolved from the fact that the first nurses were nuns. Even while working, nurses rarely speak about what they’re doing and what they’re observing. It’s hard for people to learn about nursing through our collective closed-mouth policy.

Massachusetts General Hospital did something really interesting to overcome this problem. They asked the *Boston Globe* to shadow nurses and report on it. A journalist followed a nurse mentor and mentee in the ICU for nine months. The journalist learned a lot about nursing because the mentor explained out loud to the mentee what they were doing. The *Globe* ended up running a four-part series, right on the front page, and the journalist told me that he had a huge awakening about nursing by working on the story.

**Overall, it is easier to influence advertisers than Hollywood producers**

What can nurses do to improve the image of nursing?
They can educate patients by “nursing out loud” — articulating their assessments and verbalizing what they’re thinking. For example, while taking a patient for a walk, they should explain that walking helps drive calcium into the bones, expand the lungs to prevent pneumonia and prevent strokes by inhibiting blood clots from forming.

They can present a positive personal image by following a healthy lifestyle — eating well, exercising, maintaining a healthy weight and not smoking. In the U.S., nurses often wear scrubs with cartoon characters on them. This doesn’t send the message that nurses are college- and university-educated science professionals who hold lives in their hands.

I think nurses should join us as activists. There is a mountain of work to do, and we can’t do it all on our own. If more nurses took local action, we could have a larger impact. Why not start a radio show or ask employers to invite a reporter to spend a day, or even an hour, with a nurse. Or encourage employers to put together a list of nurse experts who can be resources for journalists. We have lots of ideas on our Take Action page at truthaboutnursing.org.

**Take action right now**

- Speak to everyone you know about the value of nursing, and explain it to those you meet. Describe for them a recent incident during which you or a colleague saved a life.

- When you read, view or hear something in the media that undervalues or disrespects nursing, write to or call the media creators to object and then educate them. Let The Truth About Nursing know, so we can take action, too.

- Work with your friends, employer or professional associations to create media that informs people about health care and shows how nurses have life-saving knowledge. Write letters to the editor, submit op-ed articles or offer to do “health minutes” for radio or TV programs.

— Sandy Summers