The informational quality of news about maternal-child nursing has a great deal to do with the advancement of this specialty as well as the quality of services maternal-child nurses are able to provide. The public bases much of its valuation of maternal-child nursing services upon the information it receives from the news media. The news media has the power to create symbols, which in turn imprint images on the national consciousness and tell people what is right, what is to be supported, what is significant, and what is relevant. In other words, the public agenda, those issues in the forefront of public attention and concern, is largely set by newspapers (McCombs & Shaw, 1975; McLead, Becker, & Byrnes, 1974). Attention by the press is vital because coverage by the news media in itself gives significance to maternal-child nurses. Audiences subscribe to the circular belief that if something matters, it will be the focus of news media attention, and if something is the focus of news media attention, then it must really matter (Lazarsfeld & Merton, 1971).

Besides this status-conferral function, the news media serves as an intermediary between maternal-child nurses and the public, legislators, policymakers, and the health care industry. The news media is a powerful force
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for change and for action (MacKuen & Coombs, 1981). It is an important source for the collective definition of social reality about maternal-child nursing and social goals relative to maternal-child nursing. The news media informs the public of the existence and effectiveness of maternal-child nurses and builds mass consensus for resources needed to support and advance their services. In a large, sprawling country like ours, coverage in the news media is the only means of gaining a day in the court of public opinion. Public opinion and knowledge about maternal-child nurses strongly influence the direction of the specialty and can either enhance or retard contributions that maternal-child nurses make to better the health care of child-rearing and child-bearing families (Zukin, 1981).

The purpose of this study is to investigate the quality of information about maternal-child nurses and their services conveyed by newspapers. The following questions for the study were formulated: (1) Where and to what extent are maternal-child nurses visible to the public via the press? (2) What specific information is being conveyed to the public about maternal-child nursing issues? (3) To what extent is maternal-child nursing presented in a positive and supportive versus a negative and non-supportive manner in newspapers? (4) What changes have occurred in the presentation of maternal-child nursing over time? (5) What differences exist in newspaper coverage of maternal-child nursing versus other clinical nursing specialties and non-clinical articles?

Method

The research methodology of content analysis, which provided specific measurement of the messages disseminated to the public about nursing, was utilized in this study (Krippendorff, 1980). This investigation of the quality of news about maternal-child nursing communicated via the nation’s newspapers is part of a comprehensive study of the informational quality of all nursing news.

A nation-wide clipping service is employed to clip all newspaper articles about nurses and nursing with each clipping identified as to name, location, and circulation of the newspaper, date of publication, and page placement within the publication. According to the service’s own estimates, they locate approximately 80% of all articles on any subject they clip. In order to validate this premise, the project subscribed to an additional clipping service for three months. Results of comparisons of the two clipping services showed that 73% of all articles were identical for each service. No clipping service differences were found for the variables under study.

The “News Analysis Tool,” which included sections dealing with dissemination, audience exposure, subject of the article, and themes important to
the quality of nursing news, was developed and tested for use in the project. Coders were recruited and trained to apply the tool to the newspaper articles. All coders underwent a standardized training program prior to the actual coding of the data. Intrarater reliability was determined by having coders recode a randomly selected sample of articles several months apart without access to the original coding sheets. Intrarater reliability across all coders and items was 93%. Interrater reliability was determined by having all coders analyze a sample of randomly selected newspaper articles. Interrater reliability across all coders and all items was 94%.

Results

This analysis is based on 675 newspaper articles on the subject of maternal-child nursing published from 1978 to 1981. These 675 articles were compared with 4,208 articles on other clinical nurse specialties (medical-surgical, community health, and psychiatric/mental health nursing), as well as with 20,180 non-clinical articles. As a portion of the clinical articles, maternal-child nursing with 13.8% came in third after medical-surgical with 30.8% and before psychiatric nursing with only 2.9%. The community health nursing specialty had the greatest number of articles with 52.4% of the total. Articles on the subject of maternal-child nursing have increased from 1978 to 1981 (Figure 1). As will be noted in Figure 2, however, since there has been a growth in articles about all nursing subjects, the actual percentage of nursing articles that focus on maternal-child nursing has declined. The percentage of clinical articles devoted to maternal-child nursing has also fallen off from 16.4% to 13.4% over the four year period studied.

The maternal-child nursing newspaper articles were written on a variety of subjects. The most prominent ones were: nurse-midwifery (26.5%); prenatal education (14.7%); inpatient maternity nursing (11.3%); newborn intensive care (8.6%); inpatient pediatric nursing (6.8%); pediatric nurse practitioners (5.8%); gynecological/family planning nurse practitioners (5.2%); ambulatory pediatric nursing (2.1%); education for parenting (1.9%); and a number of other subjects which had a low frequency of appearance. It was interesting to note that only 1.3% of the maternal-child nursing articles focused on the work of clinical nurse specialists with graduate preparation. Obviously nurse-midwives, with over one-fourth of the maternal-child nursing articles, have done an excellent job in gaining visibility for their cause, especially given their small numbers.

Every subject has a life cycle. In other words, all ideas or innovations go through a growth stage, a maturity stage, and a decline stage. In terms of the maternal-child nursing subjects, analysis of time trends showed that one subject increased—gynecological/family planning nurse practitioners—from
3.2% to 5.9%, while two others decreased—pediatric nurse practitioners (from 9.6% in 1978 to 3.4% in 1981) and inpatient maternity care (from 12.8% to 11.8%; $\chi^2 (63, N = 675) = 83.0, p < .05$). Pediatric nurse practitioners, the first type of nurse practitioner to be developed, peaked early in terms of public exposure and is now on the decline, while gynecological/family planning practitioners, a specialty to develop later, has not yet reached the apex of public exposure in its life cycle.

Patterns of Dissemination and Audience Exposure

The analysis of the geographic distribution of maternal-child nursing articles per capita is shown on a state by state basis in Figure 3. The ten states with the highest number of maternal-child articles per capita were as follows (from highest to lowest): Utah, Tennessee, District of Columbia, Missouri,
Oregon, Oklahoma, Connecticut, South Carolina, Wisconsin, and Montana. The ten states with the lowest number of newspaper articles on the subject of maternal-child nursing were as follows (from lowest to highest): Delaware, Rhode Island, Nebraska, Alaska, Kansas, Mississippi, Ohio, Nevada, Kentucky, and Idaho.

While the above rankings are important since they indicate the overall exposure (per capita) maternal-child nursing received in each state, it also seemed important to compare its exposure relative to other nursing articles. For instance, perhaps some of the states that ranked highest in maternal-child nursing articles per capita simply had more nursing articles overall. Therefore a ratio of maternal-child nursing articles to all other nursing articles was calculated for each state, and this ratio ranking was compared with the overall ranking above. In general, a high (low) ranking indicates those states in which the highest (lowest) number of maternal-child nursing
articles occurred both per capita and relative to other nursing articles. Of the ten states with the highest number of maternal-child articles listed above, however, four fell much lower in the ratio ranking—Connecticut (which ranked 45th in maternal-child nursing articles out of 51 states fell to 12th in the ratio ranking), Oregon (from 47th to 21st), District of Columbia (from 49th to 31st), and Montana (from 42nd to 33rd). Thus in these states, although a high number of maternal-child nursing articles per capita were published, they also tended to have a high number of all types of nursing articles. Similarly, of the ten states with the lowest number of maternal-child nursing articles, one state—Alaska—showed a wide discrepancy between overall maternal-child ranking and the ratio ranking. While Alaska fell fourth from the bottom in maternal-child nursing articles, it ranked 40 (out of 51 states) for articles overall. In other words, while Alaska’s overall per capita ranking of maternal-child articles was not high, compared with the number of nursing articles written in this state, maternal-child nursing did fairly well.
Maternal-child nursing newspaper articles appeared in larger circulation newspapers than did articles on community and medical-surgical nursing specialties, $F(3, 4626) = 53.7, p < .001$. Approximately 66% of articles were published in daily newspapers with the other 34% of articles published in newspapers appearing less frequently than every day, a pattern similar to the other clinical specialties. The maternal-child nursing specialty did appear in more frequent publications than did the community nursing specialty, $F(3, 4875) = 20.7, p < .001$. Maternal-child nursing articles were also more likely to be the subject of wire stories (UPI or AP) than other clinical specialties, $F(3, 4879) = 17.2, p < .001$. Unfortunately maternal-child nursing wire stories declined markedly in 1980 and 1981. Maternal-child articles were larger (42.1 square inches) than community and medical-surgical nursing specialties (31.9 and 36.8 square inches respectively; $F(3, 4879) = 13.9, p < .001$). This was true for all four years studied. Maternal-child nursing specialty articles both had more photos and those photos were also larger than in the community and psychiatric nursing specialties (number—$F = (3, 3937) = 27.7, p < .001$; size—$F(3, 3937) = 27.0, p < .001$).

Surprisingly, hard news stories, those that focus on current events, were the most common type of maternal-child nursing articles (69%), with feature stories, or those without the critical time element, falling into second place (31%). This was similar to articles on the other specialties; clinical articles as a whole were likely to appear in the feature format as opposed to non-clinical articles (29% vs. 12%; $\chi^2(32, N = 24775) = 755.5, p < .001$). It is also noteworthy that letters to the editor dealt far less with clinical than non-clinical content ($\chi^2(32, N = 24775) = 755.5, p < .001$).

**Characteristics of Maternal-Child Nurses**

It should not be surprising that female nurses predominated across all subjects and all years studied. But maternal-child nurses depicted in newspapers were even more likely to be exclusively women (96.6%) when compared to stories about medical-surgical (89%) and psychiatric (89%) nursing specialties, $F(3, 3617) = 22.9, p < .001$. The traditional stereotypes of mothering and self-sacrifice along with details about the physical appearance and personal life of nurses showed up significantly more often in maternal-child than in the community and medical-surgical nursing specialties, $F(3, 4879) = 19.6, p < .001$. Maternal-child nurses were shown to have a higher educational level than nurses in the community and medical-surgical nursing specialties, $\chi^2(12, N = 4883) = 242.8, p < .001$. The BSN or a higher degree was reported in 15% of maternal-child nursing articles while this level of education appeared in only 8% of the other nursing articles. Newspaper articles focusing on the clinical area of maternal-child nursing were
less likely to include practical nurses and aides than the other clinical nursing articles, \( \chi^2(12, N = 4714) = 102.0, p < .001 \) or non-clinical articles, \( \chi^2(16, N = 24201) = 279.6, p < .001 \).

**Characteristics of Maternal-Child Nursing Practice**

Although articles on the maternal-child nursing specialty focused on preventive care less (44%) than in the community specialty (53%), they mentioned preventive care more than the medical-surgical (7%) and psychiatric specialties (13%; \( \chi^2(3, N = 2701) = 603.9, p < .001 \)). Unfortunately there has been a decline in the inclusion of the preventive aspects of care in all articles including the specialty of maternal-child nursing (Figure 4). Similarly, maternal-child nursing stories took place in a community or outpatient setting (34.5%) more often than medical-surgical nursing (24.9%) and non-clinical articles (5%), but less often than community nursing articles (97.5%; \( \chi^2(3, N = 4445) = 2377.4, p < .001 \)). Psychiatric nursing was similar to maternal-child nursing in terms of the setting they were shown to practice in. This did not differ over time.
Newspaper articles portrayed maternal-child nurses engaged in more progressive clinical nursing (i.e., emotional support to patients and their families, nursing process activities, expanded role functions, patient education, technical procedures, and acting as a resource to other health care providers) than nurses in either the medical-surgical or psychiatric specialties, \( F(3, 4879) = 12.2, p < .001 \). Similarly, maternal-child nurses in newspapers were more likely to be engaged in progressive non-clinical activities (namely administration, teaching, and scholarly work), than were nurses in the other specialties, \( F(3, 4879) = 59.9, p < .001 \). Across years, both types of progressive nursing activities—clinical and non-clinical—are increasing for all clinical specialties, but this trend is particularly true for the maternal-child non-clinical progressive activities, \( F(3, 671) = 8.5, p < .001 \). Adding to these positive findings is the fact that maternal-child nursing newspaper articles were more likely to mention the advantages of nursing providers over other health care practitioners than either medical-surgical and psychiatric specialties, \( F(3, 4879) = 102.8, p < .001 \). They were also much more likely to be shown in innovative roles. In fact, the maternal-child specialty accounted for half of all the innovative roles shown in the clinical articles despite the fact that it only represented 14.4% of these stories.

**Relationships**

When relationships of nurses with a variety of organizations and groups were examined, clinical nursing articles as a whole were more likely to depict these relationships as positive than non-clinical articles for the following groups: \( \chi^2(36, N = 4366) = 300.0, p < .001 \); the government, \( \chi^2(8, N = 7484) = 127.4, p < .001 \); patients and consumers, \( \chi^2(8, N = 25142) = 2815.4, p < .001 \); physicians, \( \chi^2(8, N = 25156) = 1393.5, p < .001 \); and other providers, \( \chi^2(8, N = 25156) = 118.4, p < .001 \). Nurses were also praised more in clinical than non-clinical newspaper articles, \( \chi^2(4, N = 6620) = 354.2, p < .001 \). These findings held up for comparisons made between maternal-child and non-clinical articles; in addition, the depiction of maternal-child nurses in newspapers contained less positive relationships with other nurses than did articles focusing on community or medical-surgical nursing specialties, \( F(3, 334) = 4.9, p < .002 \). Maternal-child nurses, on the other hand, were praised less by physicians than medical-surgical nurses, \( F(3, 82) = 2.6, p < .05 \) and less than community health nurses, \( F(3, 79) = 3.6, p < .02 \). Maternal-child nurses actually received less praise overall than did the nurses in the community and medical-surgical specialties, \( F(3, 1956) = 7.6, p < .001 \). Maternal-child nurses were also more likely than nurses in other clinical specialties to mention negative treatment of nurses, \( F(3, 3937) = 41.7, p < .001 \). Yet it is interesting to note that
maternal-child nurses were more likely to have colleague-type relationships with physicians than nurses in community nursing who had significantly more subordinate relationships, \( F(3, 896) = 17.6, p < .001 \).

**Quality of Image**

While clinical nursing articles were more positive than non-clinical nursing articles, the specialty of maternal-child nursing was not different from other clinical areas on the overall quality of nursing image presented in newspapers. Over time, the image of maternal-child nursing in newspaper articles followed a similar pattern to the articles as a whole: A more positive image was seen in 1979 than the other years (Figure 5).

**Discussion**

These data show that when maternal-child nursing newspaper articles are published, they are somewhat more visible than articles about the other clin-
maternal-child nursing specialties in that they appear in larger circulation newspapers, are more likely to be wire stories, maintain higher publication frequencies, have larger article size, and more photographs of a larger size. Yet the relatively small proportion of articles appearing on this specialty (only 14.4% of the clinical articles and 3% of the total) cancels out these positive factors and reduces audience exposure to maternal-child nursing issues and services markedly. Certain states were particularly deficient in the number of newspaper articles published on maternal-child nursing. Some of these states ranked considerably higher in the amount of nursing news generated overall. Thus the citizens of these low-ranking states are especially being deprived of vital information needed to make judgments about maternal-child nursing.

Even though maternal-child nursing stories are published more often as feature stories than other nursing news, the potential remains largely untapped. We estimate that there are literally hundreds, perhaps thousands, of maternal-child feature story ideas every year in every city and state across the nation which are not being developed by maternal-child nurses, because they lack the skills to market newsworthy ideas, but also because they have not been aware of the importance of public opinion about nurses and nursing in terms of gaining access to resources to carry out their responsibilities in health care. This is not to say that all hard news stories about maternal-child nursing are being covered by the press—much work is needed in knowing how to alert the press to these stories as well.

The limited subject areas which make up maternal-child nursing newspaper articles also attest to the fact that many potential areas for news reports are being lost. Nurse-midwives should be applauded for their success in gaining such a high proportion of the maternal-child news market, especially since they represent such a small percentage of the total number of nurses working in the specialty. Yet this fact serves to highlight even more dramatically the need for other maternal-child nurses to work diligently to gain news attention for their areas of subspecialization. If the news generated by nurse-midwifery were removed from the maternal-child category, the specialty would slip to an abysmal 10% of the total number of clinical articles.

In terms of information quality, maternal-child newspaper articles included a higher level of education among nurses, a greater focus on preventive care, more progressive clinical and non-clinical professional nursing activities, innovative roles, and mentions of the advantages of nurse providers, a greater number of positive relationships with other nurses, and more collegial relationships with physicians. On the other hand, maternal-child articles contained a higher percentage of exclusively female nurses, less praise of nurses by physicians and hospital administrators, more role confusion, and more mentions of negative nurse treatment and the traditional nurse stereotypes of mothering and self-sacrifice. They were equal to other clinical articles in overall image. Since conflict with physicians and health care ad-
ministrators could be viewed positively, or at least neutrally, given the need for nurses to air at least selected problems to the public in order to gain their understanding of key issues blocking the delivery of quality nursing care, it can be concluded that maternal-child nursing news compares very favorably with the other clinical specialties as well as non-clinical articles about nurses and nursing. Consequently, a marked growth in the number of newspaper articles on the subject of maternal-child nursing would have a positive effect on the quality of nursing news generally.

Recommendations

Maternal-child nurses touch parents and children everywhere, affecting their lives in multiple ways. Yet the results of this study make it clear that most families are inhibited, by their lack of knowledge, from thinking about the consequences of advances in maternal-child nursing or participating in decisions about them. Newspaper reporting on maternal-child nursing is only a poor shadow of what it could be, but with a concerted effort on the part of the maternal-child nurses, this situation could be vastly improved. Maternal-child nurses need to develop a campaign to gain more news coverage of the crucial role they fill in health care. The public needs information about the wide range of services maternal-child nurses provide and the cost effective and quality advantages of these services relative to those available from other health care providers.

Every opportunity for newspaper coverage of maternal-child nurses and nursing services should be developed to its fullest. It goes without saying that any innovative maternal-child nursing educational program, service or demonstration program, or any results of maternal-child nursing research should receive the attention of the press, but many other events and achievements are also newsworthy. Some examples are: anniversaries (e.g., 25th year anniversary of the establishment of a masters degree program in maternal-child nursing); special observances (e.g., Nurse Midwifery Day); appointments (e.g., new clinical specialists appointed in local health care agency); awards and honors (e.g., Maternal-Child Nurse Achiever of the Year); benefits and fund-raisers (e.g., campaign to create a center for children with cystic fibrosis); community service (e.g., maternal-child nurses offer free health assessments to children under five at the local shopping center; nurses provide family planning services to adolescent girls each Saturday); committees, elections, and actions (e.g., new president of NACOGG or NAP-NAP elected; local district nurses’ association takes a position to support child health legislation); speeches, conventions, meetings and programs (e.g., a nationally known maternal-child nurse coming to give a speech on infant bonding next week; the annual convention of the American Association of the Care of Children in Hospitals is being held here this week and one speaker
is a maternal-child nurse who has done research on preparing children for surgery; *competitions and contests* (e.g., writing contest won by local maternal-child nurse); *localizing of national positions and events* (e.g., The American Nurses' Association at their recent convention passed a resolution in favor of legalized abortion); *new facilities and dedications* (e.g., local children’s hospital begins construction on a new building; and *any unusual subjects or events* (e.g., nurse saves life of child by resusitating him at a local restaurant). Since this list is by no means exhaustive, it is easy to see just what potential exists for maternal-child nurses to gain news attention.

To get started, maternal-child nurses in health care agencies as well as maternal-child nursing organizations need to develop media or public relations committees to take leadership in generating news and interacting with the press. Any available public relations personnel, such as a hospital’s public relations director, should be contacted for assistance. The nurses assuming the lead in this effort need to develop a master list of all possible publications—including shopper giveaways, regional news weeklies, etc.—which could potentially publish a news or feature story about maternal-child nursing. They then need to analyze the characteristics of these articles, make personal contacts with editors and reporters, and learn to write effective news releases which fit the needs of various publications. It is also important to develop the skills required to secure effective photographs which consistently convey the desired message. Maternal-child nurses should also encourage editorials to be written about issues of concern to them. And when a reporter or editor develops a particularly strong newspaper story or editorial about maternal-child nursing, an award, sponsored by a local nursing group, would be most appropriate. Maternal-child nurses also need to make greater use of the letter to the editor as a means of calling attention to an upcoming event or worthy cause, enlisting support for a matter of vital public concern, explaining a misunderstood point, taking a stand, or thanking the community, individuals, or groups for their support for a special service.

Although these activities may seem foreign, and perhaps even uncomfortable at times, to many maternal-child nurses, it is helpful to recognize the fact that almost all other professional groups have been actively engaged for years in the process of influencing the quality of public information about their particular group. The failure of maternal-child nurses to assume responsibility in this arena is a disservice to not only maternal-child nurses themselves, but more importantly to the children, the mothers and the fathers they service since the allocation of resources to maternal-child nursing services depends upon public understanding and confidence in them.

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