



# IMPROVING THE

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Unfortunately, in contrast with past characterizations of nurses in the mass media, nurses today are usually portrayed in a derogatory light (1-3). Such negative public images affect nursing in several important ways. First, since public opinion is vital to the success of social, political, and professional groups in attaining their goals, these images distort the public's concept of nursing and reinforce an outmoded legacy of beliefs, expectations, and myths about nursing. Second, such images affect the quality and number of persons who choose nursing as an occupation, particularly troublesome in a time when young women (and nurses are mostly women) are increasingly choosing to enter traditional men's fields of work. Third, these images affect the decisions of policymakers relative to the allocations of scarce resources for the profession. Fourth, consumers, too, are

affected as these portrayals deprive the public of knowledge of the many vital services that nurses provide. Physicians continue to receive credit for virtually all positive health care outcomes—a discrepancy reinforced by the print and electronic media.

And finally, these portrayals affect nurses' self-images and undermine nurses' self-confidence, beliefs, and values. Many nurses, therefore, do not watch or listen to media presentations because they find them too painful. Their response is similar to that of blacks in the 1930s and '40s who disliked hearing the program *Amos 'n' Andy* on radio, because it offered a stereotyped view of blacks. Although broadcast television is controlled by a few hundred individuals and advertisers, it is received by more than 200 million Americans. Special interest groups such as nurses have a right to be considered in determinations about the way in which their profession is portrayed in the mass media.

How, then, can nurses change negative portrayals of nursing in the media? Nurses can intervene by voicing their objections to the demeaning, one-dimensional, and damaging media portrayals of themselves and their work and, thus, reverse the decline in the quality of their public image. Intervention consists of four steps: getting organized, monitoring the media,

reacting to the media, and fostering an improved image.

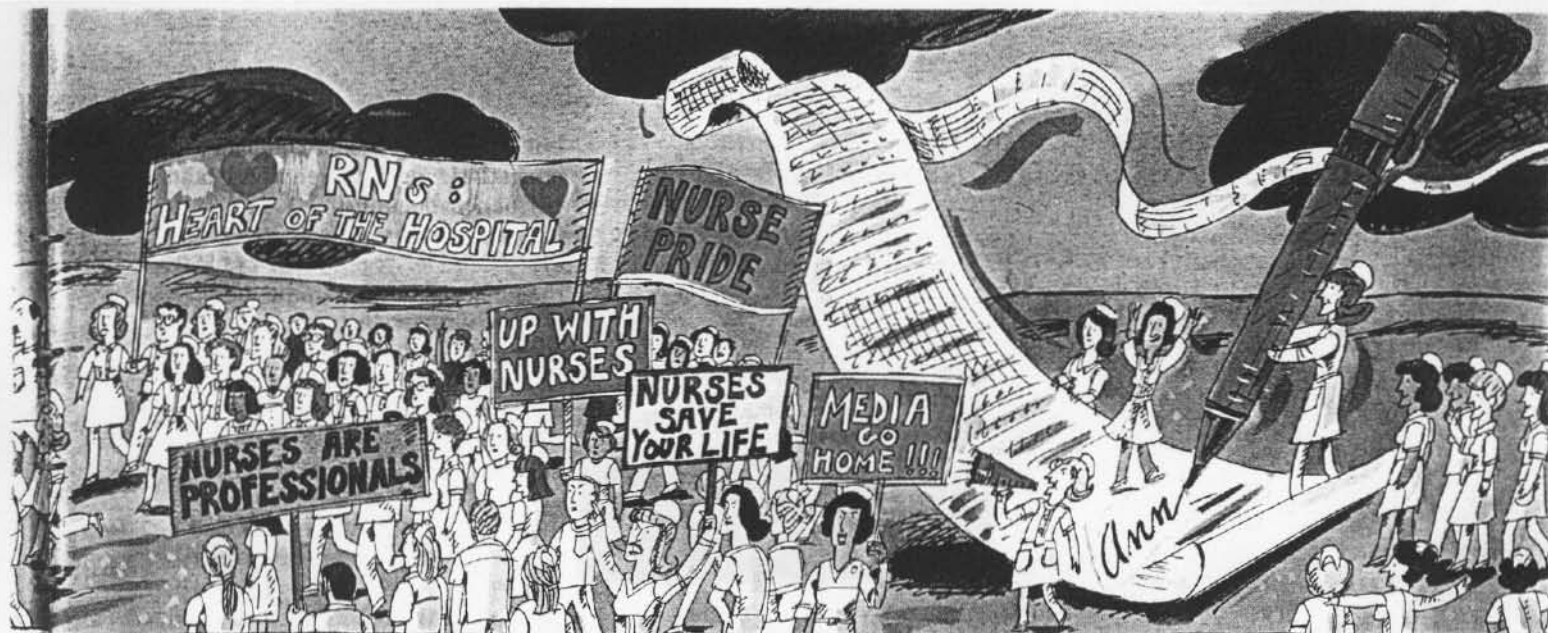
The first step is organizing "image of the nurse" or "nursing in the media" committees in work settings—hospitals, community, agencies, schools of nursing—or through organizations such as local, state, or national nursing groups. Some efforts have been undertaken by the American Academy of Nursing, ANA, NLN, and the American Association of Critical Care Nurses (AACN), and by local and district associations.

At present, approximately 250 "media watch" committees exist for other groups. They represent a diversity of special interests and opinions such as "Black Citizens for a Fairer Media," "Action for Children's Television," "National Organization Against Sexism in the Media," and "National Latino Media Coalition." A national action group designed to deal with the image of the nurse might be called "Nurses for Media Change" or the "National Nurse Media Coalition."

Once organized, nursing groups can embark on a systematic effort to monitor, at both the local and national levels, all the forms of mass communication—television, motion pictures, novels, newspapers, magazines, and radio.

After monitoring programs, nurses must make appropriate and timely responses that respectively commend or condemn particular

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# IMAGE OF NURSING

portrayals of nurses. This process includes writing letters of protest or praise to producers, directors, editors, writers, sponsors, advertisers, and other persons responsible for the creation and financial support of media depictions. Obviously, the larger the response, the more effective the campaign. Special media newsletters or news columns in nursing journals can keep nurses informed about positive and negative images of the profession in the media as well as appropriate actions to take. For example, the British journal *Nursing Times* has a bimonthly column "In the Media," appraising the depiction of the nurse in the British mass media.

Media executives and sponsors pay attention when a media-conscious organization protests a defective image, since profit-oriented business ventures must be sensitive to public reaction. In addition, broadcasters are obligated by federal law to operate in the public interest. The public actually "owns" the airwaves—each station is granted temporary use of a specific frequency or channel by government license. A triangular relationship thus exists between viewer, sponsor, and broadcaster. The Federal Communications Commission (a six-member team appointed by the President) licenses corporations to use specific channels for three-year periods. The broadcaster must fulfill certain obligations to keep a license.

The station's records are subject to review whenever the license comes up for renewal, and these records can also be examined by the public. By law, the broadcaster must consult with citizens who are representative of the viewing area to determine their needs. He must present programming of crucial local importance, airing various viewpoints. The broadcaster may and does use the airwaves to make money, but the public's needs must be served at the same time.

Several occupational interest groups are seeking to influence their media image. For example, the International Association of Machinists deplores the way in which blue-collar workers are depicted on TV programs and has joined other labor groups in subsidizing a campaign to monitor network and local programming. They plan to use their findings as evidence to challenge license renewals and to bring pressure on broadcasters.

The top decision-makers in the media industry are the key persons to contact. The 1982 edition of *Broadcasting Yearbook* contains a complete listing of the address, telephone numbers, and managers of 9000 local radio and TV stations. Local addresses can also be found in local telephone books.

For newspapers and magazines, the publisher or editor should be contacted; their names are listed on the editorial page. Most refer-

ence libraries have copies of *Ayer Directory of Publications or Editor and Publisher Yearbook* which list the important facts about printed media. Noting bylines of individual reporters and contacting these individuals about particular stories is another useful strategy.

Letters to the editor of a local newspaper are effective ways to make nursing viewpoints known in a community. In writing, remember to (1) be brief and get to the point, preferably in one page or less; (2) identify yourself as a registered nurse; (3) address only a single issue in any one letter; (4) frame your letter in relation to the specific news story, program or event that precipitated your response; (5) clear your letter with the officers of the association if you purport to represent the position of that group; and (6) make copies of your letter, if published, and distribute it to other nurses and policymakers.

A reactive strategy that can be utilized for offensive motion pictures depicting nurses is to picket motion picture theatres that show such films. Buying products advertised on programs portraying negative images may also be avoided. Picketing local grocery stores that sell the product will alert the public. Also notifying the manufacturer of the reasons for not buying the product is important.

Next, nurses must actively foster a positive image. One starts by



## CHECKLIST FOR MONITORING THE MEDIA

### Prominence in the Plot

- Is the nurse in a leading role or a supportive role?
- Is the nurse actively participating or shown in the background (handing instruments, carrying trays, pushing wheelchairs)?
- To what extent are nurses shown in professional roles, engaged in nursing practice?
- Who provides the actual nursing care? The nurse, or others?
- In scenes with MDs or hospital administrators, who does the talking?

### Demographics

- Does the portrayal reflect men as well as women in nurses' roles?
- Are nurses shown to be of varying ages and marital status?

### Personality Traits

- Are nurses portrayed as: intelligent, rational, confident, ambitious, sophisticated, problem solvers, assertive, powerful, nurturant, empathic, sincere, and kind?
- How do the personality traits of other health care providers in the program compare with nurse traits?
- When nurses exhibit the above personality traits, do such portrayals show them to be abnormal in some way?

### Primary Values

- Do the nurses exhibit values for service to others, humanism, scholarship, achievement?
- Are these differences in nurses' values compared to other health care providers?
- When nurses exhibit scholarship and achievement, do such portrayals show them to be abnormal in some way?

### Sex Objects

- Are nurses portrayed as sex objects; referred to in sexually demeaning terms; or presented as appealing because of their physical attractiveness rather than their intellectual capacity, professional commitment, or skill?

### Career Orientation

- Is the profession of nursing shown to be an attractive and fulfilling long-term career?
- Is the work of the nurse shown to be creative and exciting?
- How important is the career of nursing to the nurse portrayed?
- How does the nurse's career orientation compare with other professionals depicted in the program?

### Professional Competence

- Are nurses praised for their professional capabilities by others?
- Do nurses praise other professionals for their competencies?
- Do nurses exhibit autonomous judgment in professional matters?
- Is there a gratuitous message that a nurse's role in health care is a supportive, rather than central, one?
- Do nurses have a positive impact on patient/family welfare?
- Are nurses shown harming or acting to the detriment of patients?
- How does the professional competence of nurses compare to the professional competence of other health care providers?
- When nurses exhibit professional competence, are they shown to be abnormal in some way?

### Education

- Who teaches nursing students?
- Who appears to be in charge of nursing education?
- Is there evidence that the practice of nursing requires special knowledge and skills?
- What is taught to nursing students?

### Administration

- Are any roles filled by nurse administrators or managers or are all nurses shown as staff nurses or students?
- Is there evidence of an administrative hierarchy in nursing or are nurses shown answering to physicians or hospital administrators?
- Are nurses shown turning to other nurses for assistance or are they depicted as relying on a physician or other character (generally male) for guidance, strength, and/or rescue?

### Overall Assessment

- Overall, is the presentation a positive or negative portrayal of nursing? Why or why not?

building strong media contacts and educating media executives and personnel about nursing today. Conferences that bring nurses and media executives together to examine the image of nursing in the media is a very effective strategy and was used last year by the North Carolina League for Nursing. It is also important for at least some nurses to learn the technical aspects of the media industry so that they can use their expertise for the advancement of the profession. How the mass media react to nurses and their concerns rests partly on how well nurses understand the roles, functions, and purposes of the media.

Offering media consultation is another strategy. When scriptwriters, producers, and other media personnel need information they often contact the office of the American Medical Association's Physician Advisory Panel on Radio, Television, and Motion Pictures in Hollywood, California or use AMA's toll-free telephone number for information about accuracy in their depictions of both medicine and nursing. The AMA has been active in providing free consultation since the 1950s, as have many other groups such as the National Education Association and the American Bar Association.

Awards and prizes are other strategies nurses can use to reward positive media depictions of nurses and nursing. The AMA routinely gives awards at its annual conventions to actors, producers, and directors for their representation of physicians. Similarly, the National Commission on Working Women gives special awards to television portrayals of working women such as Esther Rolle in CBS's *Good Times*. The American Academy of Nursing, AACN, and Sigma Theta Tau gave awards to the producers of the 1981 CBS documentary "Nurse, Where Are You?"

Another type of award or prize is offered in a writing contest for journalists, authors, and producers. These contests are frequently published in *Editor and Publisher*, where entries are solicited for annual competition. These awards carry a substantial cash payment (\$250 to \$5,000), typically for several categories (books, newspapers, magazines, radio, television, and film).

Among the professional associations offering such contests are the American Psychological Association, the American Speech-Language-Hearing Association, and the American Bar Association.

In addition, talented nurse authors should be honored. We found in our research that nurse authors presented the most positive images of the profession and physician authors, the least favorable(4). Our past boasts of several outstanding nurse authors, including Mary Roberts Rinehart and Dorothy Deming. Presently, two nurses who have updated the tradition by writing non-fiction accounts of their work in 1982 are: Carol Gino, *The Nurse's Story*, (Linden Press) and Barbara Huttman, *Code Blue*, (Morrow Press). Special grants might be established either to provide financial support or recognition to nurse authors of both fiction and lay publications.

Health information columns and programs on local media channels are another method of reaching the public with positive impressions of the profession. A few nurses have ventured into this exciting area, such as a nurse in Mesa, Arizona, who writes a newsletter for diabetic patients and another in Milwaukee, Wis., who appears nightly on TV news and offers health information in a five-minute segment; but the true opportunities have scarcely been tapped.

The nursing career literature—primarily books in school and public libraries which present the profession to prospective nurses—is sorely in need of updating and revision. It is heartening to note that a new career book about nursing by Downs and Brooten is in the process of publication(5). What books about nursing are in schools and your public library?

Seeking news coverage of real-life events about nursing is an important dimension of actively upgrading our image. First, one must determine which type of story to seek—news reports or feature stories. The latter do not have the urgency of today but have long-term interest for the public.

Our study showed that news stories pertaining to clinical nursing yielded the most positive image of

nursing, particularly stories about specialties such as nurse midwifery, nurse practitioners, ICU-CCU, neonatal intensive care, and emergency room nursing. But again, other nursing dramas could be told.

In determining which stories have news value, consider who is or will be affected by the potential story and how they will be affected. Reporters are interested not only in the views of official sources (politicians, bureaucrats, executives, heads of action groups), but also in the opinions of those being affected by official actions (patients and staff nurses). When subjects can be tied to larger news stories that are constantly making headlines (e.g., the soaring costs of health care), they are more likely to be perceived as important news.

For more routine press contacts, news releases, combined with personal and phone contacts before and after submitting the news releases, are effective methods. A well-written news release not only increases the likelihood that a story will be printed, it also enhances the chances that the story will communicate a positive image of nursing, since little or no rewriting may be necessary. The lead should attract or "hook" reader's attention. It might be a quote, a dramatic statement, a question, a paraphrase, a scenario or dialogue, a slogan or theme, or a contradiction.

Preparing extensive press packets with adequate information for reporters, being sure reporters get enough information and interviews with the necessary persons, or releasing information to document the problem also facilitate good relationships. Of course, a follow-up phone call or letter thanking a reporter for coverage is a must. Media trust is built by having a continuity of competent nurses who relate effectively to reporters and editors. On one hand, having just one nurse or a few whose names constantly appear in the media has political drawbacks in terms of group cohesion. Yet when anyone and everyone speaks to the media, confusion and contradictory comments often result, damaging both media and public confidence. Nurse spokespersons should be readily accessible even during night and early

morning hours; they should be articulate and respectful of facts, since credibility can easily be lost by handing out misinformation or by exaggerating the truth.

Talk-show appearances are another effective strategy to present nursing issues to the public. To gain access to such shows, nurses should contact the station's community affairs director, identifying the group they represent and the reasons that a guest appearance is desired. If the broadcaster does not seem interested, he or she might be convinced by discussing the public significance of the issue. Be prepared to answer such objections as:

- "This doesn't sound lively enough to excite our audience and to get people to phone in, and our show relies heavily on audience phone-in response."
- "Well, we'll make a small announcement, but we can't spare a reporter. Can you write it up yourself?"
- "Send us some information, and we'll get back to you."
- "I don't think your issue has broad enough appeal."
- "Sounds interesting, but I'm not sure it really has any news value."
- "If we air you, we'll have all the physicians in town on our backs."

Prepare in a mock interview, giving the participating nurse or nurses a chance to think through all the possible questions and curves that might be thrown during the program interview, so that they may formulate convincing answers and articulate the important points. If there will be several interviewees, develop a unified stance: in particular, anticipate any touchy or confusing subjects that may arise. There is nothing worse for the image of a group than the spectacle of people in that group arguing publicly with one another.

In addition to news coverage and interview shows, nurses may air their messages and announcements on radio and television through Public Service Announcements (PSAs). The FCC requires that all radio and television stations provide free time to nonprofit organizations to announce programs or activities of community interest. PSAs, however, may cost a great deal to produce (\$500 to \$5,000 for a one-min-



ute spot) and FCC regulations do not ensure that all PSAs produced will be aired nor when.

Campaigns to improve the image of the nurse are needed on all levels: institutional, community-wide, state, regional, and national. These campaigns will differ in their focus and approach but should use a key phrase such as "Nurses Save Your Life," or "RNs—Heart of the Hospital" that is repeated in a variety of ways. The institution's public relations personnel may be helpful, if asked. Feature stories about nursing can be developed for coverage in an institution's own newsletter or newspaper. Buttons might be worn, cards placed on patients' trays (if hospital), and signs posted on bulletin boards and doors.

For a community or statewide campaign, coverage in local newspapers, television and radio news, and interview shows is a must. Other strategies include the use of brochures, bus posters, mailers, bumper stickers that promote a positive image (not a sexual innuendo), stamps, postcards, fairs, and community events.

Many of these strategies might also be incorporated into a regional or national campaign. In addition, there is a need to stimulate interest in a prime time network television entertainment series that portrays a progressive image of the nursing profession. Also needed are a series of one- or two-minute television spots that show nurses in a variety of up-to-date roles.

Changes in media portrayals of nursing are both necessary and possible. Some changes have already begun, but they will continue and grow only if nurses make their opinions known and work actively to supplant outdated or negative media images of nurses with vital, positive, accurate accounts of today's nursing profession.

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# A District

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The publicity and professional outrage generated by the 1981 decision of *Playboy* magazine to feature nurses in an upcoming issue served as a catalyst for the development of the Chicago Nurses' Association Task Force on Nurses' Image in the Media. Nurses in Chicago as well as around the country protested to the magazine's publisher by a variety of means—letter, phone, and mailgram. Whether the collective protest of these nurses turned the tide or not, the magazine canceled its

plans to publish the feature.

The incident and its threat to the professional image of nursing served as a focal point for a group of nurses in Chicago who decided that the time had come for local action to correct some myths and misconceptions. A call to the membership went out, and soon a group of 25 Chicago nurses met to discuss what could be done to improve the poorly understood and inadequately articulated image of professional nursing. A striking finding in this meeting was that a consensus about nursing does not exist among nurses themselves! It became clear that we nurses must work to clarify the role of nurses and nursing within the health care field as well as explaining these roles to the public.

We started by developing a list of undesirable stereotypes about nursing as well as a list of the desirable images we hoped to foster. The lists were divided into three parts: the nurse, the nurse's role, and the nursing profession. (One list appears on next page.) We decided that all

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