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WHY IT WORKS
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TEACHING PARENTS
WHEN TO SUSPECT
THE ELUSIVE SYMPTOMS
OF REYE'S SYNDROME

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NURSES ON PRIME-TIME TELEVISION

New Light On Our Image

This month AJN launches the first of a three-part series on the image of nursing, a study conducted by researchers Beatrice and Philip Kalisch. Their first report shows us our image as it is reflected in television characterizations. Later AJNs will carry their studies of nursing as reflected in films and novels.

Looking at one's image as it is interpreted by others is like looking at one's shadow: if you see it at all, you recognize your shape and movement but you resent any distortion.

So, lest you want to burrow into a groundhog hole and ignore the shadow revealed in some of the Kalisch findings, let me first commend to your attention the current top fiction bestseller, *An Indecent Obsession* (Harper & Row). Its central character is an Australian nurse who, though entirely lacking in psychiatric preparation, accepts sole responsibility for a small psychiatric ward of soldiers in a tropical army hospital toward the end of World War II.

Though the nurse is far from perfect—in fact, she makes some grave errors—she is an admirable, sympathetic, assertive, intelligent, loving woman. In the end she opts not for romance but for her nursing career—the duty which is one of the “indecent obsessions” of the book's title.

What makes me cheer is that 300,000 copies of this book have been sold since its release in late October. Regardless of any criticism you or I might have, thousands of people are sharing the author's appreciation of nursing skill described in passages such as this:

On his arrival he was weeping, so immersed in his despair that he neither knew nor cared where they put him. . . . Then the person who had hovered greyly in the background began to intrude upon his misery, making an irritating nuisance of herself. She stuck herself onto him, bullied and even forced him to eat, refused to admit there was anything special or different about his plight, made him sit with the other patients when all he wanted to do was to shut himself inside his cubicle, gave him jobs to do, needled and poked him into talking, first about anything, then about himself, which he infinitely preferred.

Returning awareness stirred sluggishly at first, then seemed to leap. . . . Not that he always liked her at first; she was too matter-of-fact and unimpressed by his uniqueness. But just as he had decided she was a typical army nurse, she began to thaw, to reveal a softness and a tenderness so alien

to most of the [war] experiences . . . that he would have drowned in it had she let him. She never, never did. Only when he deemed himself cured did he begin to understand how subtly she had chivvied him along.

Australian author Colleen McCollough, who also wrote the bestseller *The Thorn Birds*, is a neurophysiologist who has spent several years associated with hospitals and thus with nurses. Her *Sister Honour* Langtry in this latest book has an intellectual fascination with nursing and a self-renewing awareness of each patient's uniqueness.

Also on the bestseller list, on the nonfiction side, is *Pathfinders* (William Morrow & Co.), Gail Sheehy's new book. One of the women who scored highest in well-being in Ms. Sheehy's book was Trisha Worby, who was a public health nurse and nurse practitioner in Anchorage prior to her death two months ago in a traffic accident. Ms. Sheehy's image of Trisha Worby is presented as follows:

With six villages under her care and much the authority of a doctor, she could set up immunization programs and women's clinics and teach self-help to her heart's content, at a salary of \$25,000 a year. Trisha and her husband are described as “uncommonly creative” in “amplifying this pathfinder quality . . . the capacity for loving.”

In addition to these cheering bestseller views, the current (and to us, oft-aired) reasons for the nursing shortage were written into a plot of the CBS-TV comedy *House Calls* in early January. This means to me that the causes of the shortage are finally reaching popular awareness, and that is a real sign of impact.

Image is nebulous, very like a shadow. It cannot be caught and held, nor can permanent changes be made easily. For the past couple of years our collective efforts have focused on changing an image we knew lagged decades behind reality. We shouldn't want to be returned to the pedestal of the past, to be viewed only from a distance and thus subject to distorting caricature, as well. We are stirring curiosity as people worthy of closer scrutiny. That, I believe, is one way to interpret the Kalisch findings.

We have much more to do, each of us, in order to help people understand what it is that nurses really do.

But Colleen McCollough's sensitive portrayal will surely have an effect. And I choose to look out from my groundhog burrow and take that as a harbinger of coming spring.



Mary B. Mallison, RN, Editor



Nurses on Prime-Time Television

By Philip A. Kalisch
Beatrice J. Kalisch

Popular attitudes and assumptions about nurses and their contributions to a patient's welfare can determine to a large extent the future of nursing. Today some opinions held by the public have been derived directly from the image of nursing projected through television fiction over the past three decades.

Without question television is the single most important source of information in the United States. Ninety-seven percent of American households have television sets and the average viewing time is 6 hours and 36 minutes per day(1). *U. S. News & World Report*, in its seventh annual survey of "Who Runs America," ranked television as the institution second only to the White House in influence(2).

But the reality of contemporary nursing practice over the past 30 years has found little or no echo in the largely fictional world of television broadcasting. Over the past 15 years, the popular image of the nurse not only has failed to reflect changing professional condi-

tions, but it has also assumed strongly derogatory traits that undermine public confidence in and respect for the professional nurse.

With few notable exceptions, television entertainment creators have paid insufficient attention to the depiction of nursing, using nurses far too often as background scenery for hospital-centered drama. When nurse characters have been singled out for attention, this attention has usually taken the form of delving into personal problems rather than professional concerns. Moreover, the nurse characters have served and continue to serve as handmaidens to the medical profession. Much of the current image of nursing on television derives from the exaggerated idealism and heroism ascribed to physician characters—with the TV physician looming so large that the TV nurse cannot help but pale by comparison.

We have come to these conclusions from our study of the image of nursing on prime-time television for the period 1950–1980. To do this, we developed three content analysis tools in the coding of television programs. Coders who applied the instruments underwent a standardized training program designed for the project. Intrarater reliability was 88.4 percent and interrater reliability was 90.2 percent. Validity testing was also carried out(3).

The study included 28 series with a regular nurse character. Fourteen series featured a nurse as a major character (one of at least a supporting role status in a series that ran two seasons or more). We selected a 20-

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percent random sample of the programs from each of these series for analysis. The elements of the overall programs along with the attributes and characteristics of nurse and physician characters were studied.

The activity that was emphasized most as depicting what nurses do was acting as a resource to other professionals. When this interaction was with physicians, however, nurses were largely shown taking orders. Expanded role and educational and scholarly activities were rarely evident.

Physician characters were portrayed as seeing their work as a more important part of their lives than did nurse characters. Physicians were also more active and successful in their professional careers than were nurses. Nurses were, however, at least no more likely to act to the detriment of patients than were physician characters.

In doing a content analysis for personal attributes, we found that physicians demonstrated higher levels of ambition, intelligence, risk taking, rationality, adeptness, aggression, self-confidence, and sophistication. They were even portrayed as more sincere, altruistic, honest, and perceptive than the nurses. Nurses scored higher only on obedience, permissiveness, conformity, and flexibility. Physicians and nurses did not differ in efficiency, organization, and discipline.

Considerable differences were also found in nurse and physician characters as to their primary values. Physicians scored higher on their values for achievement, integrity, intelligence, power, self-sacrifice, duty, humanism, and family. Nurses scored higher on only one value, serenity. The greatest surprise is that nurses ranked lower than physicians for humanism, self-sacrifice, duty, and family and ranked equally in virtue and love, all values traditionally ascribed to nurses.

The 1950s

Nurse characters in this period largely projected either a wholesome, girl-next-door profile or else, for older nurses, characters that had benign, motherly traits. For example, Ms. Nancy Remington, the school nurse on *Mr. Peepers* (1952-1954), lived with her parents until her marriage to the series' star, mild-mannered Robinson Peepers, a high school biology teacher. Almost no attention was given to Nancy's work as a nurse. Although nursing *per se* received little mention, for good or ill, at least the character of Ms. Remington deserved the respect of the audience—she was considered to be a fine young woman, eminently worthy of marriage to the protagonist.

Janet Dean, Registered Nurse, appearing in 1954 and played by Ella Raines, presented the life and work of an unmarried, attractive woman in her early thirties. She had been a military nurse during the war, but now practiced as a private duty nurse out of a New York agency. Janet was not portrayed as a romantic figure in any of the episodes, unlike other TV nurses of the 1950s. Often she appeared as the savior and protector of the weak, in near heroic situations. The most frequent theme, appearing in one-third of the episodes, found Janet in a criminal or disaster-type situation calling for extraordinary bravery or solutions.



Ella Raines as Janet Dean

Janet's greatest nursing skill was her ability to identify psychosocial problems and handicaps that contributed to a patient's poor health status. Critics surprisingly noted that Janet often applied her psychological treatments "with or without the doctor's approval or help." One critic thought that Ms. Dean was both "attractive and competent" but particularly appealing in those episodes in which she was "still busy being a nurse and had not yet gotten around to more Freudian aspects of the case" (4). Although nursing skill infrequently received attention, the nurse character clearly emerged as a dynamic woman, a problem solver, and an individual of initiative.

A few years later, Abby Dalton played nurse Martha Hale, a navy lieutenant, in the comedy *Hennessey* (1958-1961). Martha too exuded a clean-cut, wholesome girlishness. She enjoyed a long-running romance with the series' hero, Chick Hennessey, a navy physician; her romance was also rewarded with marriage in the last year of the series. Martha's main traits arose from her position as female antagonist in the fifties' "battle of the sexes" themes, so prevalent in situation comedy. Martha was illogical, gossipy, subject to frequent changes of heart, but intuitive and successful in dealing with people.

The 1950s also saw the first important medical drama—*Medic* (1954-1956), a 30-minute anthology on health care themes. Although the cast of characters changed weekly, the philosophy of the show remained the same: Physicians were the priests and heroes of American society. Nurses invariably appeared as weaker, less objective, and less skilled appendages of the medical profession. They were admirable for their gentleness and loyalty perhaps, but definitely of limited use without a physician's supervision.

Dr. Hudson's Secret Journal, which also aired in the mid-1950s, included moral lessons and miraculous character transformations in every episode. The protagonist of the series, Dr. Wayne Hudson, had acquired the secret of success in life—to do good secretly. Toward this end, Hudson maintained a secret journal in which he recorded his good works.

The most important nurse character of that series was Ann Talbot. Although she was occasionally referred



Frances Mercer as loyal nurse, Ann Talbot

to as the superintendent of nurses, she, was, in fact, Dr. Hudson's personal assistant. Her virtues were legion. She was patient, discreet, attractive, competent, loyal, and devoted to Dr. Hudson. Her involvement with patients, however, was infrequent; most of her appearances occurred in Hudson's office where she typed his lectures, arranged his calendar, and listened to his problems. In addition to her official duties at the hospital, Ann assumed the role of surrogate mother to Hudson's motherless daughter, Kathy.

Nurses in this period were rarely depicted as professionals. Nurses quit work upon marriage, remained firmly subordinate to physicians in matters of patient care, and occasionally appeared flighty or given to the exercise of "womanly wiles" and were governed solely by intuition. Despite this portrayal, however, the image of nursing remained positive and more respectful of the profession than presentations of nurses seen in later health care dramas. Nurses were, at least, dignified women and appreciated for their contributions.

The 1960s

This decade witnessed the spectacular success of several health care dramas. The introduction of two series—*Ben Casey* and *Dr. Kildare*—prompted public attention and an enthusiasm similar to the publicity that would surround *Dallas* a generation later. James Moser, who created and wrote *Medic*, introduced *Ben Casey* on ABC in 1961. The program became an immediate hit because of Vince Edwards's instant popularity with adolescent girls.

Because of the series' preoccupation with the surly neurosurgeon, nurses were rarely shown as having a major role in the dramatic narrative. If they did, the nurses never contributed to the patient's recovery. They performed tasks involving minimal skill and no judgment.

Nurses were not even deemed worthy of a romantic fling with Ben, who dated his share of other professional women. One episode included a pretty nurse hopelessly

in love with her physician employer; she listened to him explain why he would not marry her:

I was married to a nurse, just like you. And she was a romantic dreamer, just like you. Sure. They say it's good for a doctor to marry a nurse because she understands what a difficult life a doctor has. . . . She's supposed to understand the long hours and the failure and the death. . . . Well, that's unadulterated bunk.(5)

Thus, an entire profession was dismissed as a group of romantic dreamers. When the nurse characters developed serious problems, they always turned to a physician for help rather than to another nurse.

The only continually appearing nurse was Ms. Wills, who was seen in nearly every episode for five years and never once referred to by her first name. She always wore her uniform, even off-duty among other staff members in street clothing. Colorless Ms. Wills smiled, but never laughed; frowned but never lost her temper, and through it all, she answered the phone and delivered messages in a most professional manner.

NBC's entry into the health care trend of the 1960s came in the boyishly charming package of one Dr. James Kildare, portrayed by Richard Chamberlain.

The *Dr. Kildare* series avoided the heavy-handed depiction of a self-righteous medical crusader in the *Ben Casey*-style, but it did present the physician-protagonist in glowing, near reverent terms. Jim Kildare, for all his inexperience, was no less heroic than the brooding Ben.

Nurses sometimes appeared in the series as romantic foils for young physicians, and in the final season, head nurse Zoe Lawton, played by Lee Kurty, became a regular cast member and Kildare's permanent love interest. Occasionally writers did feature sympathetic nurse characters in featured roles—a nurse trying to send her brother to medical school, a nurse coping with a grouchy patient, a nurse recovering from drug addiction, a nurse facing a difficult pregnancy, and so forth. But in all these situations, the nurses had to turn to physicians for the resolution of their personal problems.



Lee Kurty as Zoe Lawton in *Dr. Kildare*



The professional responsibilities of the nurses on *Dr. Kildare* were similar to those shown on *Ben Casey*. Most were either young and pretty or old and prim. Nurses never appeared as married women with families.

Despite this negative drain on the image of nursing, the sixties represented the highest point for the image of the nurse ever reached in television programming. The sole series that established this high point was CBS's hour-long drama, *The Nurses*, which lasted two seasons (1962-1964) before being transformed in its third year to a more conventional physician-dominated format as *The Doctors and The Nurses*. Thanks to producer Herbert Brodtkin's commitment to realism and good writing, nurses and nursing emerged in a positive but not exaggerated light. Most of the nurse characters demonstrated balanced, well-rounded personalities; good nurses had human frailties and troubled nurses usually had redeeming virtues or extenuating circumstances to mitigate their negative features.

In the character of Liz Thorpe, played by Shirl Conway, resided the single best image of the professional nurse in television history. Liz Thorpe, a head nurse in a busy New York Hospital, proved to be objective, articulate, disciplined, and concerned with the professional development of herself and her colleagues.

More than any other series, *The Nurses* demonstrated the existence of nursing standards and organization. The nurses appeared responsible for their own internal discipline and for defending their rights and privileges. When nurses developed personal and professional problems, they sought advice and help from other nurses. But most important, the nurses in this series identified problems and found solutions.

The personal attributes of intelligence, altruism, perceptiveness, sincerity, honesty, and energy were portrayed in nurses to their highest degree in TV history during the 1960s. This was also the highest point for nurses to be commended by other characters in the programs, to be respected by physicians, to exhibit disharmony with physicians, and to use their own judgment in a patient care situation. Nurses were more assertive and exhibited more drive and professional dominance than

in any other decade. It was, however, also the lowest point of nurse conformity to traditional personal and professional behaviors.

Physicians, on the other hand, did not change in these respects over time, with the exception of altruism and adaptiveness, which became much greater in the 1970s. Intelligence and love were attributes increasingly associated with physicians from 1950 to 1970. The physicians increased in their display of self-sacrifice from the 1950s to the 1960s and this attribute remained high in the 1970s.

Another important portrayal of a nurse late in the decade came with the NBC comedy, *Julia* (1968-1971). Although the star was a nurse, this series' claim to fame rested on its revolutionary use of a black woman, Diannah Carroll, as the leading lady. Professionally, however, *Julia* fell back firmly to the 1950s image of wholesome young women who just happened to be nurses.

The 1970s

Gains made in the 1960s were rapidly lost in the 1970s at the same time that the women's movement indicated that the reverse should have been true. The most pernicious development in the image of nursing in the 1970s was the increasing, blatant use of nurse characters as sexual mascots for groups of men, usually physicians. With the relaxation of censorship standards, television programmers exploited their new freedom with liberal use of sexual innuendo and provocative costuming for female nurse characters.

Certain series also used nurse characters to provide sexual titillation: *Operation Petticoat* (1977-1978) and *Black Sheep Squadron* (1977-1978) were the most notorious offenders, but even the venerable *M*A*S*H* (1972-1982) frequently resorted to sexual exploitation of nurse characters, especially in its early years.

The two most popular health care dramas of the 1970s, *Medical Center* and *Marcus Welby, M.D.*, provided dozens of images of nurses in various roles. *Medical Center* (1969-1976) starred Chad Everett as the omniscient, omnipotent, ubiquitous, and downright self-

righteous physician, Joe Gannon. The series was cast in the same mold as other health care dramas—an attractive young doctor working under the kindly eye of an older physician who provided wise counsel born out of long experience.

There was little room for nurses in this celebration of the good doctor; indeed, most episodes used nurses only to create a realistic setting. Joe made it clear that the only good nurse was a blindly obedient one. Generally, Gannon and the other physicians treated the nurses respectfully and pleasantly when they did speak to them, but conversations almost always were short and nurses were called by their last names only, underscoring the lack of emphasis on the nurses' personalities and the lack of personal relationships between them and the physicians. Although *Medical Center* often featured Gannon's relationships with women, they were almost never with nurses.

Over *Medical Center's* seven seasons, a number of programs featured nurses as leading characters, half of which were in the last two seasons. In nearly all these episodes, the nurse appears in a somewhat unfavorable light as the following examples illustrate:

- a dedicated student nurse tends to overstep her bounds (1969).
- a dedicated nurse refuses to recognize that her own condition requires surgery (1970).
- a student nurse contracted syphilis before she met her fiancé, who is sure his girl is "sweet, wholesome and innocent" (1971).
- a pregnant nurse wants an abortion, feeling incapable of raising a second child without the help of her errant husband (1975).
- a lonely nurse insists she loves a man who beats her terribly, and she refuses to press charges against him (1975).

The nurses were not condemned for their problems in these episodes, but all of them needed Gannon's help to solve their predicaments. Hence, the viewer's attention was once again directed to Gannon rather than to the nurses, and the viewers were left finally with the

image of nurses as women who are pleasant but rather inconsequential providers of health care.

Marcus Welby, M.D. (1969–1976), the top Nielsen-rated series of 1970–1971, was yet another celebration of the good doctor who knows and treats his patients as whole human beings rather than as mere receptacles of disease. In this series, it was two physicians—kindly widower Welby and handsome young Steve Kiley who typically dealt with a patient whose health problem was complicated by personal factors (either economic, social, or psychological). They gave generously of their time to solve these personal problems, whereupon the success of their treatment was virtually assured.

Consuelo Lopez, Welby's office nurse, projected the primary image of nursing in the series. She was a kind, warm, loving woman who occupied a position of trust in the Welby practice. Brief scenes showed Consuelo working in the office lab or giving injections—all with such an air of casual assurance that the viewer was convinced of both her education and her experience. Furthermore, both physicians treated her with professional respect and listened seriously to her judgments, which were occasionally better than theirs.

These positive images, however, were nearly lost in the nonprofessional views of Consuelo. She made coffee for the waiting patients, chatted with them about their families or jobs, read stories to their children, and generally acted like a friendly neighbor.

In one episode per season, Consuelo was given a major role and, in these shows, she always appeared to good advantage. It was not until the last two seasons of the series that nurses began to have a slightly more professional image. They were shown providing nursing care with competence and intelligence.

In an effort at hospital comedy, *Temperatures Rising* appeared on ABC off and on from September 1972 until August 1974. Throughout its short life (and three formats), the show portrayed the adventures of a fun-loving wacky staff of a Washington, D.C., general hospital. Cleavon Little played the central character, Dr. Jerry Noland, a fast-talking, street-wise black intern and



Jayne Meadows as Chambers in *Medical Center*



Elena Verdugo as Consuelo, Dr. Welby's nurse



then resident. The series' improbable plot revolved around Noland's schemes to raise money for worthy causes or to solve ridiculous problems. As the Robin Hood of the Hospital, Noland counted upon the support of a loyal band of accomplices: a sexy head nurse; a not-so-sexy, good sport staff nurse; and a cute, dumb, and eager student nurse.

The salient quality of the nurses shown in this series was their adeptness at being followers. They were incapable of handling any situation on their own.

In the second year, the nurses assumed less attractive features—laziness, insensitivity, and sexual experience beyond the general norm. In both formats, the professional identities of the nurses remained cloudy: a head nurse stood at the nursing station and answered the phone, a staff nurse did such things as delivering mail and running errands, and the student nurse mostly did a little typing, a little patient care, and a lot of dropping things. No hierarchical pattern among the nurses appeared; nurses failed to provide leadership not only

within the general framework of the plot but also within their own numbers. Although physicians depicted in the series were greedy, unethical, sarcastic, and silly, they still emerged as problem solvers and natural leaders.

Other popular series of the 1970s that featured regular nurse characters were *Emergency*, *The Rookies*, and *The Waltons*. Within these series, the nurse characters played secondary roles. Although they were usually perceived as admirable, competent nurses, audience attention was directed toward the more active pursuits of the leading men. For example, the image of nursing in *Emergency* (1972–1977) was mixed.

The actual nursing care seen was simple and non-skilled—taking vital signs, helping patients on stretchers, and so forth—and nurse Dixie McCall performed only a few duties in each episode. She did them, however, with a quiet confidence that suggested much more experience than was actually shown. She was on a first-name basis with the physicians, who discussed cases with her, counted on her help, and gave orders with confidence in her ability to carry them out.

Given all this remarkable talent and wisdom, Dixie's portrayal ought to have been better than it was. Her depiction was marred by a number of indirect factors. Foremost was her relative unimportance compared to the paramedics and the physicians. The paramedics, making rapid, vital decisions about proper life-saving techniques, stabilized the patients sufficiently so that they could be transported to the hospital where the physicians then administered the treatment that assured the patients' return to health. Dixie's function seemed to be only subsidiary to both of them. Dixie seemed secondary to the paramedics simply because she did not appear as often. Her scenes rarely totaled 10 minutes out of 60.

The most current series in terms of the image of the nurse can be found in *M*A*S*H*, the all-time most popular series in television history, now in its tenth season. Over the years, the show has changed enormously. A notable improvement has come in the treatment of nurses. During the first several seasons, Margaret, (then mockingly called Hot Lips) the short-tempered, hyper-





Christopher Norris, nurse on *Trapper John, M.D.*



Michael Learned as Mary Benjamin in *Nurse*

critical head nurse, was one of the "bad guys"; now, she is fully integrated into the "good guys" camp and shares in the audience sympathy for the irreverent, iconoclastic, yet utterly humane doctors who work in a field hospital during the Korean War.

Although little evidence of professional incompetence ever tarnished the *M*A*S*H* nurse's image in the early days, the glimmer of nursing skill lay under a heavy layer of sexually oriented jokes and situations that marked the nurses' primary role as leisure-time mascots for the male surgeons.

In later seasons, however, *M*A*S*H* offered the most professional view of nurses currently seen on prime-time TV. In one episode, for example, the nurses were evacuated, leaving the men to cope for themselves. Everyone pitched in to help with the "nursing chores" in the operating room, but it was soon evident that nursing was a special skill, not something just anyone could do automatically. For all his former insubordination, Hawkeye declared fervently that if Margaret were here right now, "I'd kiss her feet." To Father Mulcahy, who was assisting with more goodwill than effectiveness, he said, "Keep those sponges coming, Father. Remember, 'nurse' is also a verb. Not only is 'nurse' a verb, it is a different verb from 'doctor'."

Although *M*A*S*H* has shown evidence of presenting nursing more forcefully and positively in its last two seasons, unfortunately no trend appears to have been established. Two current series, *Trapper John, M.D.* and *House Calls*, suggest that without intervention by the nursing profession, the coming decade will offer little improvement in the quality of the depiction of nurses on prime time television. Both series reveal all the stereotypes of years gone by. The head nurse character on *Trapper John* serves as a general servant for the chief surgeon, and the comely staff nurse, nicknamed "Ripples," plays both a wholesome pal to the male doctors as well as the sexual focus of the series. A recent episode of *House Calls* featured a reputedly good intensive care unit nurse who also worked as a stripper at a nightclub.

A ray of hope is contained in the new CBS series, *Nurse*, first aired as a two-hour long pilot in the fall of 1980, then as a mini-series, and now on the 1981-82

schedule as a regular program. While the pilot projected a more positive image of the nurse than the mini-series did, *Nurse* could serve to introduce many aspects of nursing ignored in the past.

A consistently misrepresented image of the professional nurse on television can affect negatively the way in which the public thinks about nurses. In the 1980s, both consumers of health care services and health policy makers will be asked increasingly to consider the proper role and value of the nurse to the nation's health care industry. Statistics, documentation, and rational argument concerning the nursing profession can make but little headway against constantly reinforced negative stereotypes of nurses found in the entertainment media.

A well-documented nursing shortage now afflicts the nation's hospitals, nursing homes, and community services, and this shortage will worsen in the coming decade as the demand for nurses increases and the ability of the profession to attract and retain competent practitioners decreases. How can young men and women consider nursing a desirable career choice when the profession is devalued and ridiculed in the media? How can legislators make informed decisions about the expansion of nursing practice when they, too, may suffer from media-induced misconceptions about the profession? The future of nursing requires that voters and politicians understand that nurses do not operate within the restricted sphere of menial duties shown on television.

If nurses are to be used fully within the health care system and secure adequate resources to accomplish their responsibilities, a concerted effort must be made to upgrade the quality of the nursing image currently being projected on the television screen so that the true role and health care contributions of nurses can be communicated to the general public and its policy makers.

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