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Role and Image of Nursing in Children's Literature: A Qualitative Media Analysis

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Purpose: Nurses' role and image as portrayed in young children's literature were described and analyzed.

Design and Methods: A total of 30 children's books (pre-kindergarten through grade two audience) written in English were chosen using progressive theoretical sampling. Included were books, both fiction and non-fiction and with varying years of publication, that mentioned nurses and/or were about general healthcare topics. The books were analyzed using the method of qualitative media analysis which is derived from the theoretical framework of symbolic interactionism.

Results: Nurses were generally portrayed positively but simply and inaccurately in this sample of children's literature. The seven themes discovered were labeled as nurse characters using traits evident in the sample: nurse unlikely, nurse minimal, nurse caring, nurse subordination, nurse skillful, nurse diversity, and nurse obvious.

Conclusion: The image of nursing is socially and culturally constructed, and accurate portrayals of nurses and their roles are necessary in all media. Thus, better representation of nurses in children's books is needed as young children's literature is an important first exposure to the art and science of nursing.

Practice Implications: Future children's books authored by nurses may more closely reflect accurate contemporary nursing practice and contribute to an improved image of the nursing profession.

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MESSAGES COMMUNICATED THROUGH mass media influence socialization (Potter, 2011) and transmit attitudes, values, and perceptions (Dominick, 2009). In particular, because children do not yet have extensive knowledge of the world around them, they may be more likely to believe information received from the media (Strasburger, Wilson, & Jordan, 2014). Storybooks are one form of media often used by children and values, desires, and perceived realities are transmitted to young children via those books (Court & Rosental, 2007; Tsai, Louie, Chen, & Uchida, 2007). Children form perceptions at a young age (Dyer, Shatz, & Wellman, 2000; Howard, 2002) which, even if based on

stereotypes, influence initial occupational goals (Hartung, Porfeli, & Vondracek, 2005). Thus, a perception of nursing formed in childhood from stories in literature may have subtle but far-reaching and important influences. The image of nursing is socially and culturally constructed by adults for children, and accurate portrayals of nurses and their roles are necessary in all elements of the media including literature.

There was a clear gap in the knowledge base on the topic of nurses' image and role in books with respect to young children's (pre-kindergarten through grade two) literature. Although Kalisch and Kalisch (1983a) included "preteen" fiction in a study analyzing the effect of authorship on nursing image presentation, the findings were not described with respect to the categories of intended audience making it difficult to determine which findings might be specific to young children's literature and even whether "preteen"

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fiction included sources geared toward young children. To our knowledge, no study has explicitly and solely examined the phenomenon of nurses' image and role portrayal with respect to young children's literature. Therefore, the research question was, How are nurses' image and role portrayed in young children's literature? This interpretation was derived from the adult nurse researchers' analysis of the books.

For the purpose of this study, the parameters for young children's literature were pre-kindergarten through grade two. We followed the same classification, ages eight and under, used for "young children" by the National Association for the Education of Young Children (NAEYC). This age range comprises the period when young children will first be exposed to this type of media. Further, books geared toward the pre-kindergarten to grade two age range consistently feature both words and pictures, facilitating consistency in the type of media being reviewed for this study. After the grade two level, books tend to feature fewer or no pictures. Children learn to read at some point during this range, so the books could be read to them or by them. Isbell, Sobol, Lindauer, and Lowrance (2004) found that both story reading and storytelling increased children's comprehension and language complexity. Therefore, either approach would be appropriate for facilitating understanding in this age range. In addition, by second grade children start dreaming about future professions (Gilchrist & Rector, 2007) and they start to shape beliefs about real world occupations (Hartung et al., 2005), so we examined storybooks that would be viewed up until that age.

Noting that nurses' portrayal in media directed toward an adult audience has generally been inaccurate and negative is important since adults comprise the world of publishing and are often the authors of children's books. Adults' own perceptions could potentially be transmitted through their writing. Nurses' image in literature has been studied, most notably by Kalisch and Kalisch (1982, 1983a, 1983b) and Kalisch, Kalisch, and Petrescu (1985), with the target population being adults. Of note, it has been almost three decades since nurses' portrayal in the media has been extensively studied. There have been many changes in healthcare in general and nursing in particular (Smith, 2013) which might affect current perceptions. Historically, nurses' image in the media was positive in the 1940s and 1950s and then became more negative thereafter (Kalisch & Kalisch, 1982; Quell, 1993). Auken (2004) analyzed newspaper articles and found that nurses were portrayed as necessary and skilled, but that the language used in articles created a negative image of the nurses' working conditions and resulted in misunderstandings of what nursing practice really entailed. McNally (2009), in an editorial from New Zealand substantiated by examples of local and international media, suggested that inaccurate media portrayals were an issue worldwide.

Theoretical Framework and Method

Qualitative media analysis (QMA) (Altheide & Schneider, 2013) was the methodological framework for this study and its goal is to verify and discover information. QMA utilizes

symbolic interactionism (SI) as a theoretical framework. QMA allows for analysis of both text and images, making it a particularly appropriate method for analyzing young children's books. People become social beings through interacting with others, and language is a medium by which this development of meaning can occur in one's life. In SI, people—including children—attach meanings to things and then those meanings drive their subsequent actions (Blumer, 1969). As Benzie and Allen (2001) explained, people's perceptions and interpretations of the world around them influence their behavior. While such subsequent actions and behaviors are not being examined in this study, SI provides a lens through which an understanding can be achieved regarding how nurses and nursing are portrayed in children's literature. One concept of SI particularly applicable to this study is that of role which was examined with respect to how it was portrayed to children through books. Cleveland (2009) explained that clarity of a role is necessary in order to know how to behave and respond. Although the QMA method focuses on adult perceptions of children's books, the meaning a child attaches to the concept of nursing can potentially influence that child's attitude about nurses.

Sample

In QMA, the unit of analysis is a document—in this case, young children's paper books. Progressive theoretical sampling (PTS) was used as books were selected "based on an emergent understanding of the topic under investigation" and "for conceptual or theoretically relevant reasons" (Altheide & Schneider, 2013, p. 56). This type of sampling is appropriate in qualitative research as it leads to a deeper understanding by allowing additional specific samples to be selected based on results previously obtained. For example, as books were located, characters were noted to be described as nurses in books not specifically about nursing. Thus, via this emergent understanding via PTS (C. J. Schneider, personal communication, May 21, 2014), books about other health care careers were searched. PTS utilizes some pre-set semi-structured categories, is reflexive, and can lead to new discoveries. Books written for a young audience were obtained by using online databases such as Publisher's Weekly, searching bookstores and public libraries and hospital libraries, and utilizing personal children's book collections. Books included were geared toward ages 8 and under and were written in English. Books that were specifically about nurses/nursing were obviously included, as well as books about general healthcare experiences and books about professions/jobs that mentioned nurses/nursing. The final sample size was 30. Figure 1 provides more detail on the sampling plan.

In QMA, messages, meanings, and nuances in the documents are investigated by researchers (D. L. Altheide, personal communication, December 29, 2014). Comparisons and contrasts between and among documents are desirable and enhance understanding (Altheide &

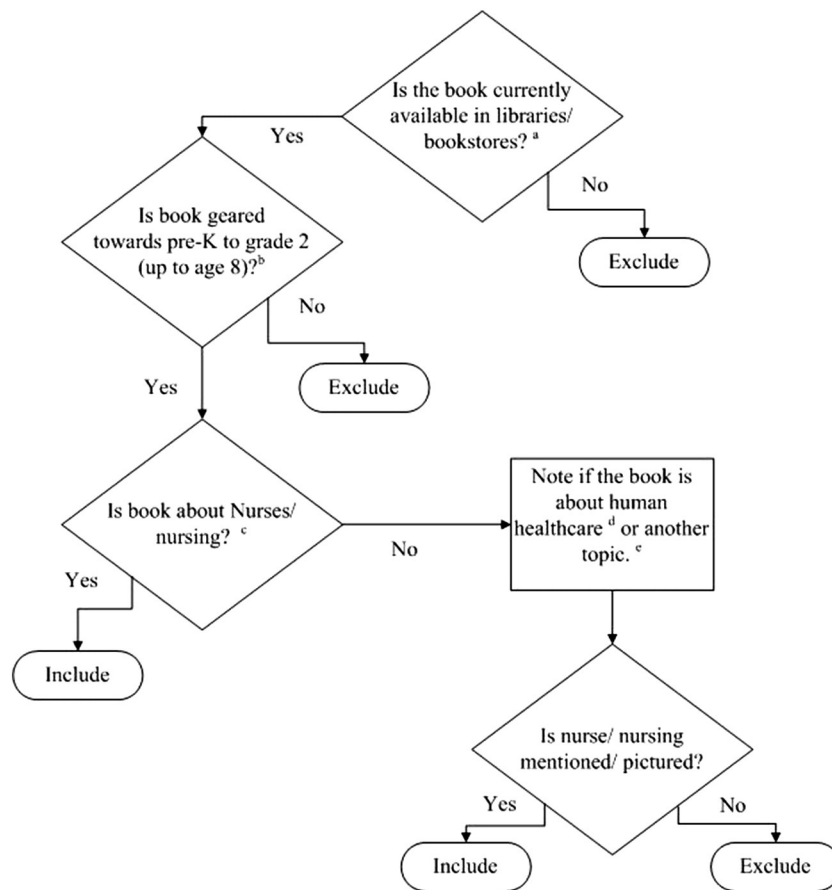


Figure 1 Sampling strategy. ^aIf book was from personal collection, databases were used to verify that the book was currently in circulation. ^bIf age recommendations were not listed in the book or the databases, researchers used their judgment regarding the book's intended reading level, at times confirmed by a librarian when intended audience was ambiguous. ^cKeywords used: nurse, nursing, nurse practitioner, advanced practice nurse, registered nurse. ^dKeywords used: health/healthcare/medicine, doctor, hospital, emergency, sick/ill, operation, profession/job/occupation, community helper. ^eHand search in libraries/bookstores/personal collections for books on other topics that mentioned/pictured nurse/nursing as this information was not obtainable through computerized databases.

Schneider, 2013). In this vein, a wide range of books was obtained. Fiction and non-fiction books were chosen to represent various main topics and goals such as profiling a nurse, profiling a day in a hospital, profiling another medical professional, educating about an illness, or telling a story which featured a nurse character. Different years of publication were included to examine differences and similarities through the years. Saturation was reached based on the criteria put forth by Altheide and Schneider, specifically that the range and differences in ideas were well represented. As examples, books representing different levels of prominence of the nurse role were represented, as were variations in the nurses' image. Redundancy of data was another indication of saturation.

Data Collection and Analysis

The semi-structured data collection guide was designed to delineate how each chosen document depicted nursing and nurses. This guide was developed by the researchers based

on a literature review on the phenomenon of nurses' portrayal in the media. Also used in the development of this guide were elements from Kalisch and Kalisch's (1983b) ideas for monitoring the media with respect to nursing portrayals since their list was based on a solid body of evidence in this area. Examples of elements used from Kalisch and Kalisch included: prominence of the nurse in the plot (central versus minor role), whether nurses were portrayed as sex objects, and whether nurses relied on a physician or each other (collaboration versus subordination). Demographic data retrieval categories were: the book title and author, year and country of publication, whether the author was a nurse, whether any nurse consultants were used, overall goal/topic of the book, whether the book was classified as fiction or non-fiction, and the setting in which the nurse worked. Interpretive data retrieval categories included the nurse's role in the book and whether the nurse's role was consistent with what nurses actually do, how the nurse was oriented with respect to other characters in the book, and the physical

appearance of the nurse. Specific aspects of each category were examined. For example, under the category of physical appearance of the nurse(s) in the book, we specifically coded for gender, approximate age, race, attire—including the presence or absence of a nurse's cap, and whether the nurse portrayed a sexy or sexualized image.

Collecting data from several documents aided in revising the data collection sheet, as is consistent with QMA. For example, posturing and positioning of the nurse was added after the first few books were reviewed as it was deemed a category that could provide important information on collaboration versus subordination. Also, the nurse's role was described but a notation of whether and how caring was portrayed was added when we realized that this aspect was not being sufficiently addressed by the category previously. Subsequently all previously analyzed documents were re-analyzed.

Data were analyzed by using emergent coding and searching for themes in both the words and the pictures in the books. Qualitative content analysis, of which QMA is a form, comprises interpreting text by coding and identifying themes and patterns (Hsieh & Shannon, 2005). Copies of the data collection sheet were attached to each book being analyzed and descriptive examples were written on the sheets. Notes taken on the data collection sheet were read repeatedly, as is consistent with the reflexive nature of QMA, and key differences in each category across documents were noted and coded according to the pre-determined categories. Summaries of data for each category, being mindful of context, were written. Each section of the data collection sheet was evaluated and findings were integrated with our interpretation and themes discovered from the data. Each of the 30 books was examined at least twice by the same author. At least 5% of the sample was coded at least a month apart by the same reviewer, and both coders analyzed a minimum of 20% of the sample, as recommended by Altheide and Schneider (2013). Any differences in interpretation were discussed until agreement was reached.

Findings

The publication range of the books was 1952 to 2013. The three books from the 1950s and 1960s continue to be published and are still found in libraries, thus they were included in the sample as they remain readily accessible to children today. For example, *Curious George* is a classic children's book and remains available despite being published decades ago. The majority of the books were published in the 1990s and the 2000s, consistent with what is seen in circulation presently. Books meeting the inclusion criteria from the 1970s and 1980s were not available through library or bookstore circulations which is why those decades were absent in the sample. All but three books were published in the United States (US). The overall purpose of the books was to educate the child audience, whether via nonfiction ($n = 17$) or fiction ($n = 13$) classification. Most of the books focused on nursing as a primary topic or on going

to the hospital. One book was authored by a family nurse practitioner (FNP) and another was authored by a nursing organization; the remainder of the books was authored by non-nurses. Two books were authored by physicians. Three authors utilized a nurse consultant or thanked a nurse for assistance. Twenty of the books included the most frequently addressed setting—the hospital. These book details are presented in further detail in [Table 1](#).

Seven themes were discovered from the analysis of the documents. Labeled as nurse characters using traits evident in the sample, the themes were: nurse unlikely, nurse minimal, nurse caring, nurse subordination, nurse skillful, nurse diversity, and nurse obvious.

Nurse Unlikely

Older books, of course, were not reflective of current practice but even books with more recent years of publication presented inaccurate nursing role functions with respect to how nurses practice presently. Nurse actions were generally more representative of what a nurse's aide or receptionist would do, and the reader was left thinking that the character labeled a nurse was unlikely to be an actual nurse. Tasks mentioned were handing items to the patient, fluffing pillows, dressing patients, making beds, transporting patients, adjusting the air conditioner, helping the patient eat, and calling patient into an exam room. Actions which could be nurse-specific were overwhelmingly task-oriented, such as taking vital signs, getting equipment for surgery, taking care of cuts, and pouring medications. In a book about community helpers that had one page devoted to the profession of nursing, the author stated, "Nurses help make patients comfortable, pass out medicines to them, get equipment ready, and help doctors with operations" (Kalman, 1998, p. 19). No in-depth nursing responsibilities such as developing partnerships with patients and families, assessing human responses, managing treatments, or teaching were addressed in that book. In two books, the characters labeled as nurses were not nurses—one was a veterinary technician/receptionist (Askew, 2009) and the other was a dental hygienist/receptionist (Mayer, 1990).

The lack of clarity of the role of the nurse characters was compounded by the lack of clarity regarding the title of "nurse." Nurses in a non-advanced practice role were always labeled simply as "nurses" and there was never distinction regarding whether the nurse was a registered nurse (RN) or a licensed practical nurse (LPN). Nurses' education was minimally mentioned. Trumbauer (2006) addressed the fact that nurses are educated but then the picture appeared to be a physician teaching the class, implying that nurses receive their education from physicians when they most frequently are educated by nurses. Nursing professors were not mentioned in any books as being educators of nurses. In general, the college or specialized education necessary to become a nurse was not mentioned even in books focused on teaching children about nurses.

Table 1 Book (sample) details

Author title	Year published	Country of publication	Goal of book. Fiction/Nonfiction (F/NF) *	Nurse or non-nurse author. Consultants used, if applicable	Setting(s) of book
Askew People who help: Vet	2009	US	Educate about the role of a veterinarian NF	Non-nurse. Two consultants (type unspecified) and one veterinary consultant used	Veterinary clinic and veterinary hospital
Attebury Out and about at the hospital	2006	US	Present a guided tour of a hospital NF	Non-nurse. Author thanks LPN for her expertise	Hospital
Bennett Harry goes to the hospital	2008	US	Describe experience of going to hospital for common pediatric problem, and to comfort NF	Non-nurse. Author is MD. Clinical psychologist wrote notes at end of book: tips to help parents support child	Hospital and briefly at home
Brazelton Going to the doctor	1996	US	Explain what happens when a child goes for a pediatrician check up NF	Non-nurse. Author is MD	Pediatrician's office
Brown Dr. Squash: The doll doctor	1952 original publication, renewed 1980, illustrations changed from original version and are copyright 2010	US	Show how Dr. Squash fixes dolls' ailments F	Non-nurse	Home (house calls)
Civardi Usborne first experiences: Going to the doctor	First published in 1992/revised publication in 2000	UK	Explain the process of going to the doctor F	Non-nurse. Medical advisor was used but profession of medical advisor unspecified	Doctor's office and hospital
Cousins Maisy goes to the hospital	2007	UK	Describe a child's first trip to the hospital F	Non-nurse	Hospital
Davison Kevin and the school nurse	1992	US	Educate about health and school nurse F	Non-nurse, developed by the American Medical Association (AMA)	School nurse's office
Dooley Tubes in my ears: My trip to the hospital	1996	US	Describe occurrences when child goes to hospital to have tubes put in ears NF	Non-nurse. Thanks various medical professionals for their assistance; no nurses mentioned	Hospital
Dornhoffer Doctors: Community workers	2000	US	Describe career of a doctor NF	Non-nurse. Physician content advisor was used	Hospital nursery
Flanagan Ask Nurse Pfaff, she'll help you!	1997	US	Profile an actual nurse and describe her work NF	Non-nurse	Hospital
Fluet A day in the life of a nurse	2005	US	Present the facts about a day in the life of a nurse NF	Non-nurse. RN consultant is a nurse with an EdD who was the CEO of the NLN	Clinic
	2004	US	Describe what happens on a typical day in a hospital NF	Non-nurse. Thanks hospital staff	Hospital
Gray Maddie goes to the nurse practitioner	2008	US	Educate how a child with an injury is cared for by a nurse practitioner F	Nurse: Family nurse practitioner	Health clinic
Gutman & Hallensleben Gaspard in the hospital	1999	US	Show the process and experience of going to the hospital F	Non-nurse	Hospital
Hautzig A visit to the Sesame Street hospital	1985	US	Describe a visit to the hospital to get tonsils removed F	Non-nurse. Two MDs acknowledged as giving helpful advice	Hospital

Table 1 (*continued*)

Author title	Year published	Country of publication	Goal of book. Fiction/Nonfiction (F/NF) *	Nurse or non-nurse author. Consultants used, if applicable	Setting(s) of book
Jackson Nurse Nancy	1952	US	Teach first aid habits around the house F	Non-nurse	Home
James Nurse Clementine	2013	US	Entertain by telling a story of a girl getting a nurse's outfit and dressing up and playing nurse F	Non-nurse	House/Yard
Kalman Community helpers from A to Z	1998	US	Describe various community occupations NF	Non-nurse	Describes nurses as working in nursing homes, clinics, and hospitals.
Liebman I want to be a nurse	2001	Canada	Describe the job of a nurse, provide vocational guidance NF	Non-nurse	Hospital is primary setting. Others mentioned: doctor's office, home, CAT scan area.
Macken People in my community: Nurse	2003	US	Showing what nurses wear, how they work, and what equipment they use NF	Non-nurse	Doctor's offices, hospitals, schools, factories, home
Marleau My first visit to the hospital	2009	US	Introduce children to the hospital F	Non-nurse. Lists three consultants but does not give credentials	Hospital
Mayer Just going to the dentist	1990	US	Present dentist visit, routine dental care, and treatment of cavity F	Non-nurse	Dentist's office
Maynard Jobs people do	1997	US	Describe jobs people do; nursing is one of the jobs presented NF	Non-nurse	Primarily hospital. Also school nurse
Miller Nurse	2003	US	Present information about being a nurse; book is part of the "What I want to be when I grow up" series NF	Non-nurse. Used an RN for help in preparing the book	Doctor's office, home, ED, OR, school, helicopter
Northeast Indiana Organization of Nurse Executives You can be a nurse	2001	US	Introduce elementary aged children to nursing career NF	Nurse: Nursing organization	Hospital, church, home, helicopter, school, office, college
Rey & Rey Curious George goes to the hospital	1966	US	Inform about a hospital overnight stay F	Non-nurse	Hospital
Rosenberg Mommy's in the hospital having a baby	1997	US	Help soon-to-be siblings be more comfortable with being at the hospital visiting mother and new baby NF	Non-nurse. Author credits coordinator of patient education at the hospital but doesn't specify if this person is a nurse	Beth Israel Hospital in Manhattan
Scarry A big operation	1995	US	Showing what happens when a child has to have an operation F	Non-nurse	Home and then hospital
Trumbauer What does a nurse do?	2006	US	Describe what a nurse does NF	Non-nurse	School and hospital are shown. States that nurses work in other settings

* Fiction and non-fiction classification determined by consulting regional library database for designated classification. For the one book not in the regional library database, the cataloguing librarian and the publishing company were contacted and they agreed on designation for that book.

Nurse Minimal

Even though the sample of books overwhelmingly featured nurses and hospitalization and health care topics, the nurse role was non-central in half the sample. While nurses were mentioned in the book by Gordon (2004) detailing what occurs inside a hospital, the specialized care nurses deliver was not delineated and the photographs did not clearly indicate who was and was not a nurse. Marleau's (2009) book was an educational book about a child's first visit to the hospital and the child was in the emergency department (ED). The minimal and sole role the nurse had in the book was to call the patient into the examination room when in reality nurses have a much more extensive role in an ED. The play therapist received more focus than did the nurse in the book by Bennett (2008) which was an educational book about going to the hospital for work up and treatment of an illness. In one book, the authors described the nurse speaking with and accompanying the child patient on one page, yet the nurse was not obviously pictured anywhere in the book (Gutman & Hallensleben, 1999). In the book by Brazelton (1996) about going to the doctor, no office nurse was mentioned or pictured.

Advanced practice nurses had minimal presence. The only portrayal of a nurse practitioner (NP) was the book authored more recently by an FNP (Gray, 2008). To our knowledge, prior to 2008 there were no children's books that focused on NPs. The book authored by a nursing organization represented a very wide range of nursing roles and settings but did not address NPs (Northeast Indiana Organization of Nurse Executives [NIONE], 2001). A book about doctors mentioned physician's assistants (PAs), but not NPs (Dornhoffer, 2000). In Brazelton's (1996) book about going to the doctor—the book that did not feature an office nurse or picture a nurse—NPs were mentioned. He wrote, "Some children see a special kind of nurse called a 'pediatric nurse practitioner' when they go for their checkups. The nurse [note: "nurse" appears to be referencing nurse practitioner] will examine you in much the same way that I describe in this book" (Brazelton, 1996, p. 11).

Nurse Caring

Nurses were overwhelmingly portrayed as caring, comforting, and helpful. Cousins (2007) named one nurse character "Nurse Comfort," indicating the primacy placed on this caring role. Caring was demonstrated more often in pictures than in text in this sample. Nurses were shown holding patients' hands, touching patients' backs, smiling, leaning toward patients, checking in on patients, and staying with patients—all actions that demonstrate caring. In the two books highlighting a tour of the hospital, the nurse was the leader of the tour and exuded friendliness. Davison (1992) described the nurse's voice as soft and kind. Macken (2003) stated, "A nurse works hard to help people feel healthy. Nurses help take care of people who are injured or sick"

(p. 4). This description of the nursing role as being helpful and caring was similarly stated in many of the books. In the book by Scarry (1995), the goat child about to have surgery said, "I was [scared] at first, but the nurses are so nice" (p. 13).

Nurse Subordination

Although nurses were portrayed as caring and helpful, in one third of the sample, their role was subordinate to that of the physician. This subordination occurred even when nurses had central, rather than minor, roles in the book. Nurses typically stood behind the physician or were in the background. The word "help" was used many times, referencing the nurse helping the physician. For example, Trumbauer (2006) and Kalman (1998) stressed that nurses help physicians. In a book about a nurse's day which utilized a doctorally prepared nurse consultant, there is a section titled "How do nurses help doctors?" with the answer being "by getting information" (Fluet, 1995, p. 10). In none of the books was it mentioned that this "helping" was reciprocal and that physicians helped nurses too. There was no mention in the books of nurses collaborating with anyone other than physicians or each other. If nurses and physicians were mentioned in the same sentence, nurses were mentioned first only if it was in the context of "helping" the physicians. If collaboration or working together was discussed, physicians were typically mentioned before nurses.

Even when attempts were made to portray a non-subordinate role, these attempts did not always succeed. For example, Attebury (2006) wrote, "The doctors and nurses are a lot like detectives. They solve mysteries..." (p. 21)—indicating collaboration—but then elsewhere in the same book the author discussed that a nurse performs a function "If the doctor says it's OK" (p. 9)—indicating subordination. Leibman (2001) stated, "Doctors and nurses work closely together" (p. 2) which is collaborative language, but the picture contradicted the text by showing the physician in the forefront and the nurse in the background.

Nurse Skillful

Nurses were presented as skillful, able to competently perform tasks and work with others. A few books briefly addressed higher order cognitive processes such as critical thinking, assessing, and teaching as nursing roles. In fact, one of the older books showed the nurse-child character engaged in quick thinking and leadership and was a rare example of the nurse continuing to run the show even when the doctor-child character emerged (Jackson, 1952). In a book based on an actual nurse, teaching and assessment were addressed as nursing responsibilities (Flanagan, 1997). Nurses' utilization of math and reading skills was briefly mentioned in a book about what a nurse's day entailed (Fluet, 2005).

Although subordination was more prevalent, the skill of effective collaboration was addressed. Gordon (2004) stated, "doctors and nurses work together to help [the patients]"

(p. 10), an example of expressing collaboration clearly. Trumbauer (2006) stated, “Nurses work together to make sure everyone sees the doctor” (p. 18). In this case, the collaboration was among the nurses and intended to aid the physician. Sometimes the pictures were more accurate than the words. For example, Flanagan (1997) wrote, “She [the nurse] helps the doctors take care of people who are sick...or have broken bones” (p. 8–9), indicating a more subordinate relationship. However, the picture showed the nurse and the physician sitting side-by-side in what appeared to be a discussion; this demonstrated a more equal and collaborative relationship than the words implied. In some books, there was no explicit mention of collaboration, but the pictures demonstrated collaboration. For instance, in the book by Scarry (1995), the nurse led the hospital tour and when she was pictured with a physician, they were side-by-side.

Books written by nurse authors and having no physician characters included more accurate portrayals of nurses as skilled and independent. Only two of the books in the sample were authored by nurses and neither of those books contained physician characters. In the book authored by the FNP, the nurse practitioner character assesses and educates (Gray, 2008). In the book authored by the nursing organization and sponsored by the Johnson and Johnson Campaign for Nursing’s Future, a wide range of what nurses do and where they practice was presented (NIONE, 2001). Among non-nurse authored books, when a physician character was not present, a more autonomous image of nursing typically was portrayed. For example, the book by Macken (2003) contained no physician characters, the nurses educated and took care of patients, and the nurses interacted with patients independently.

Nurse Diversity

The books classified as non-fiction represented greater diversity of gender, race, and age than did the fiction books. The oldest books in the sample did not demonstrate diversity of age, gender, and race. Fifty per cent of the overall sample featured only females as nurse characters. Only one book (Fluet, 2005) exclusively profiled a nurse who was male, and this author explicitly mentioned the increase of men in the profession. Pinpointing exact race classifications was at times difficult due to having to interpret from drawings but 11 out of the 30 books appeared to feature at least one non-White nurse character. The majority of the nurses appeared to be young or middle-aged. Of the few nurse characters who appeared older, two of those were school nurses. At times, animal characters or androgynous cartoon drawings were used to illustrate the nurse characters, making gender, race, and age difficult to determine.

Nurse Obvious

Although it was not always apparent what the nurse’s role was, it was usually obvious which character was a nurse by the generic “nurse” label and by looking at the illustration or

photograph. Nurses were presented in a variety of attire, including white scrubs, colored scrubs, white uniforms, street clothes, and even nurse’s caps. Indeed, 11 out of the 30 books featured nurses wearing caps. The three older books from the 50s and 60s depicted nurse characters wearing caps—which would be representative of nurses’ actual uniforms at that time. Of note, one of the 1952 books had revised illustrations in 2010 and nurses still were portrayed with caps. Some books from the 80s, 90s, and even the 2000s—including the most recent book in the sample, published in 2013—featured characters wearing caps. All three books published in Canada and the United Kingdom (UK) featured caps and they were published in the 2000s. Most of the books featuring nurse characters wearing caps were classified as fiction.

Typically, written descriptions of physical attributes were not used to make the characters recognizable as nurses. The one exception was in the *Curious George* book written in 1966 where the main nurse was described twice as a “pretty young nurse” (Rey & Rey, 1966, pp. 16–17), a potentially sexualized reference which was otherwise absent from the sample. The other nurse characters in the *Curious George* book, which were drawn similarly to this main nurse character, were simply described as “nurses” with no additional description.

Discussion

Overall, nurses were portrayed positively but simply and inaccurately in this sample of children’s literature. Consistent with Fairman’s (1996) analysis of how nurses were portrayed in fictional literature for over a century, there were more positive images and greater diversity present in this sample of children’s literature than was typically found in adult literature. However, there were still many inaccuracies and omissions which could potentially lead children to have an erroneous impression of who nurses are and what nurses do. Role-based discrepancies occur when there is a difference between what professionals perceive as the content of their work and what these professionals believe others perceive as the content of this work, and when the role is oversimplified (Vough, Cardador, Bednar, Dane, & Pratt, 2013). Because of the necessary simplicity of writing in children’s books due to the developmental age of the targeted audience, such oversimplification of the nursing role is expressed and not unexpected. The lack of change in the nursing role in children’s literature regardless of year of publication contrasts with the actual increase in complexity of the nursing role over time, as articulated by Smith (2013). Unless noted as historical, what children read is most likely what they perceive as current reality as they are typically not aware of the year of publication of a book.

While it might seem that non-fiction books would present the nurse role more accurately than fiction books, this classification did not make a difference in how the nursing role was portrayed in this sample. Of note, there is some

ambiguity in fiction/non-fiction designation because library classification systems are not always uniform from state to state. Also, some books are classified as non-fiction if they are educational, regardless of whether a true story is actually presented. While [Green and Brock \(2000\)](#) focused on adults, they found that beliefs were similarly affected regardless of whether a narrative was fiction or non-fiction. The fiction children's books in this sample generally contained more colorful cartoon characters than did the non-fiction books. This raises the issue of whether children may be drawn to, and therefore more likely to read, fiction books. If the message is the same and the content is accurate, the distinction between fiction and non-fiction—especially given that the classification can be somewhat arbitrary—may not be relevant.

Children of this study's target audience's age have social and developmental challenges including fear of strangers, fear of separation from parents, and fear of bodily harm. Therefore, the emphasis on caring in this sample was appropriate. However, in many cases, caring was the predominant theme of what the nurse did. [Jenner \(2002\)](#), in her dissertation focusing on a discursive analysis of gender, popular media, and nursing suggested that when "care" is the main or only contribution that nurses are seen as making, this reduces nurses' ability to be seen as professionals. While including caring is necessary, so is incorporating other vital contributions nurses make such as assessment, teaching, and critical thinking ([Price, Hall, Angus, & Peter, 2013](#)).

When nurses would realistically have a larger, more comprehensive role and the author relegates the nurse to doing something very minor, this trivializes the nurse role and makes the role seem ancillary. If nurses do have an active role in a given setting, depicting that by making the nurse a featured character in the book may demonstrate to children the primacy of the nursing role in their health. Because demonstrating and illustrating tasks is more straightforward, the true depth and breadth of nursing care may not be conveyed to children. Finding a simplified way to convey higher order concepts such as critical thinking, assessment, and teaching to children may engender a more accurate portrayal. An example is to narrate a story about how a nurse solves a problem and uses his/her knowledge to care for the patient in a competent and skilled manner.

Using the language of nurses "helping" physicians can portray nurses as handmaidens. Terminology such as "works with" or "working together" is more empowering and accurate. Of course, the pictures should match the words and show nurses and physicians—or, better yet, nurses and NPs—situated in a side-by-side manner to convey a collegial and collaborative professional relationship. Varying the order in which nurses and physicians are mentioned in sentences within the text could avoid possible hierarchical implications.

In contrast to their lack of effect on the portrayal of the nursing role, the year of publication and classification of the

book as fiction or non-fiction did affect how the image of the nurse was presented visually. As might be expected, increased diversity was evident in the more recently published books. Non-fiction books showed nurses with more age, race, and gender diversity than did fiction books. As of 2008, minority groups made up 16.8% of all RNs in the US and males made up 6.6% of all RNs in the US ([U. S. Department of Health and Human Services, 2010](#)). Nurses, even today, remain predominantly female. Exposing boys to stories of men in nontraditional roles such as nursing may lead to boys rating nursing as being more appropriate as a possible career choice. Such exposure would likely be advocated by [Gaertner and Dovidio \(2009\)](#) and [Derman-Sparks \(1989\)](#) who recommend anti-bias educational programs which would include books that reflect diversity of age, gender roles, and racial backgrounds. Also, animal characters without obvious gender and race representations may make the nurse more universally relevant to children. Of course, the type of animal would need to be chosen carefully to represent appropriate characteristics of the nurse.

Even newer books in the sample had nurse characters with caps although caps have been essentially phased out in the US and, though less recently, in Canada and the UK. Sanitation concerns, the increase of men in the profession, the feminist movement, and the move to view nursing as a profession all contributed to the end of caps ([Sibbald, 2001](#)). Children are not likely to encounter an actual nurse wearing a cap today. But, as [Herron \(2008\)](#) suggested, the cap does represent an "unmistakable identity" (p. 51) for nurses universally. Nurses being undistinguished from other healthcare staff has been identified as a problem by patients ([Stokowski, 2011](#)). Perhaps an RN badge, indicated by inpatients in the study by [Clavelle, Goodwin, and Tivis \(2013\)](#) as being the best way to identify nurses, could become the new symbol to clearly identify nurses in children's literature.

The relative omission of nurses' educational background was not surprising since many children's books about professions do not delve into the education required. Using the generic "nurse" label—as was seen in this sample—does not differentiate between RN and LPN. Labeling the nurse characters as RNs and mentioning that the RN attended school to learn primarily from other nurses would be a positive step. Incorporating NP as a career choice in books that explore various career options would promote recognition of the NP role as well.

While the findings of this study were not from the perspective of children, we can surmise that the themes could potentially affect children's perceptions of nursing. Per SI, people use the meaning of something to influence how they would act toward that something ([Blumer, 1969](#)). As [Burbank and Martins \(2009\)](#) explained, "A person's actions are...based in the meanings the situations have for him or her rather than in direct response to the event or situation" (p. 27). Following this logic, children take meaning from the words in the books they read and form ideas based upon

those words. If those words are inaccurate, this may influence children to view nursing negatively or to have erroneous perceptions of nursing. For example, choosing books about veterinary or dental care that include a “nurse” character could give children false information about the role of an actual nurse as the scope of practice of nursing does not allow for working in the capacity of a nurse in a veterinary or dental setting.

More options of representative books would allow parents, teachers, and hospital staff to share accurate information about nursing. Zeece (2000) suggested, “Well-chosen and appropriate literature supports and assists children as they become more adept at ordering, and using information” (p. 111). Children were more likely to believe information from the media and were more vulnerable to media messages than adults (Strasburger et al., 2014). An increased effort is needed on the part of publishers and authors to produce children’s books that more closely reflect contemporary nursing practice, as was supported by the findings of the present study. Elliott (2011) suggested that “media practitioners are responsible for the impact of their work, even if there is no intention on the part of the practitioner to cause harm” (p. 10).

Kalisch and Kalisch (1983b) proposed that fostering an improved image of nursing in the media was an essential intervention to change negative portrayals. One suggestion they made was for more nurses to author books about nursing. When Kalisch and Kalisch (1983a) analyzed nurse images by author type, they found that non-medical affiliated authors were less likely to depict nurses as resources to others or as educators. Nurse authors illustrated the role of nursing in a more positive and accurate light, and this is consistent with the findings of the present study where nurses were portrayed more accurately in the books written by nurse-authors. In addition, Kalisch and Kalisch (1983a) also found that nurses who authored literature were more likely to exhibit satisfaction in their career choice, suggesting that nurse authorship should be encouraged. Even the authors in this sample who used nurses as consultants did not convey a markedly improved image of nursing, so nurses as primary authors may be more beneficial.

This study is limited by the fact that best judgments needed to be used in some categories. For example, in some cases, the age or race of the nurse character was ambiguous or even not able to be determined. Also, text can involve multiple meanings (Graneheim & Lundman, 2004), as can pictures (Busselle & Bilandzic, 2011), and this can potentially result in a different interpretation than was intended by the author of the book or than what would be perceived by a child reading the book. Examining children’s own perspectives of the role and image of nursing in children’s books would be a further step in research in this area. Despite these limitations, trustworthiness of the study was demonstrated by consistency of coding as detailed earlier, being faithful to the tenets of QMA, providing

insights into the phenomenon of interest, and generating practical suggestions as a result.

Conclusion

This study contributes to our understanding of how nurses are portrayed in young children’s literature and offers suggestions for ways to present more accurate depictions of nurses and their specialized role. Although we focused on paper books, electronic books are becoming more popular, increasing access and therefore placing an even greater emphasis on such accurate portrayals. Children are impressionable, so each representation of nurses in children’s books should leave them with a meaning that will help them understand who nurses are and what they do. Vough et al.’s (2013) model showed that role-based discrepancies may negatively affect trust. As trust is a core component of the nurse–patient relationship, accuracy of the presented role should be a goal for all media related to nursing. Campaigns are underway to improve nursing’s image in the media—notably, the Johnson and Johnson campaign (Johnson & Johnson Services Inc, n.d.) and the Truth about Nursing center (Summers & Summers, 2011; Truth about Nursing). We applaud such efforts and, given the findings of the present study, hope that children and children’s literature will be included in future campaigns. The positive contributions nurses make need to be conveyed in children’s books, ideally authored by nurses themselves, to assist with the formation of valid and accurate ideas regarding nursing and correcting any erroneous perceptions.

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