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MEDIA IMAGES AND SCREEN REPRESENTATIONS OF NURSES

CONFERENCE REVIEW BY BEN SHER

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THE THING about stories is, they're sort of the intellectual diet of society. We learn about the world through the stories we tell," said Joseph Turow, Robert Lewis Shayon Professor of Communication at University of Pennsylvania's Annenberg School. "We re-enforce our ideas about society through the stories we tell. People learn about occupations through stories, about what's good and bad, about romance. Over time systematic presentations of certain people, certain ideas, certain worlds, bring people behind the scenes. And whether they know it or not, [audiences] learn about how certain occupations act, how they're supposed to do things...When it comes to health care, and specifically the representations of doctors and nurses, it is influential on how we perceive the fields."

Thus began Turow's presentation, "Playing Nurse, Playing Doctor," in which he insisted that media representations must be studied in order to assess their impact on audiences' perceptions of the world in which they live. This idea was at the core and foundation of the conference "Media Images and Screen Representations of Nurses." Taking place on May 12, the event was

organized by MarySue Heillemann, Associate Professor in The UCLA School of Nursing, with assistance from Ph.D. student Heather Collette-VanDeraa and Professor John Caldwell in the Department of Cinema and Media Studies. It was cosponsored by The Center for the Study of Women and The UCLA Chapter for the American Assembly of Men in Nursing.

Impressive in scope, the conference incorporated presentations by nurses, journalists, academic scholars, activists, and major players in the entertainment industry. Their topics ranged from representations of nurses smoking in advertising throughout the 20th century to methods by which nurses can influence and improve upon their often offensive depictions on contemporary television. The first half of the day-long conference, which will be covered in this article, began with presentations by Turow and Sandy Summers, who presented a multifaceted portrait of the ways in which nurses have been represented in media since the 1950s, and the historical, cultural, and industrial events that have informed these depictions.

Turow discussed the development of medical shows on television, which were inspired *Dr.*

Kildare, MGM's B-movie series of the 1930s. Studio head Louis B. Mayer dictated that filmmakers idealize Dr. Kildare and his mentor, Dr. Gillespie, making them perfect in terms of societal norms. "This developed a formula dictating what made successful programs about physicians: [They had to be] hospital based, doctor centered, and usually involving a younger and an older doctor," said Turow. Unfortunately, this idealization and emphasis of physicians relegated nurse characters to the sidelines. For example, in the film series, Dr. Kildare's girlfriend was a nurse. However, little attention was paid to the character until she was run over by a car in its final entry. Turow argued that these plot structures gave birth to the media's inaccurate notions that nurses are peripheral, unimportant, and exist only as lovers to physicians, which have endured throughout the decades.

One of the first shows to make an effort to break this pattern was *The Nurses*, which



ran from 1962 to 1965 on CBS. It starred Shirl Conway as the older, wiser nurse (a Dr. Kildare equivalent), and ballet dancer Zena Bethune as her young protégé. The American Medical Association strongly influenced medical shows that preceded *The Nurses* (forbidding studios to shoot in their hospitals without their script approval of each episode). Herbert Brodtkin, the head producer of *The Nurses*, resisted the influence of The American Nurses Association and instead hired an acquaintance, a professional nurse, to be an advisor on the show. The series' representation of nurses, like many socially concerned television series, contained both progressive and reactionary elements. Turow described an exemplary episode in which a juvenile delinquent comes to the hospital suffering from low self-esteem that has manifested itself as terrible headaches. In a move that was highly unusual in popular culture at the time, the hospital staff brings in an African American social worker to help them to find a cure for the boy's ailments.

Turow showed a clip from the episode, in which a physician, the head nurse, and the social worker argue about the best treatment for their patient. The physician emphasizes the patient's physical problems, the social worker insists upon the sociological reasons for his illness, and the head nurse argues that the boy needs maternal nurturing and loving kindness, and that she should bring him milk and cookies. In the end, the social worker is proved to be correct, and the nurse acknowledges it. While the nurse's agency in this episode is relegated to the feminine

sphere and eventually overturned by her patriarchal co-workers, the majority of the teleplay represented the characters as equals, reflecting the beginning stages of the Civil Rights movement and second wave feminism. Similarly striking is the episode's representation of women and African Americans fighting together for each other's causes: in the episode, a nurse aggressively takes the juvenile delinquent to task for referring to his social worker using a common pejorative term used to describe African Americans.

While *The Nurses* showed promise on an artistic and sociological level, CBS' programmers said that the show was problematic because it was too difficult to find ways in which to make nurses central. In the middle of the series' run the head of CBS programming forced the show to become a soap opera, and changed its title to *The Doctors and the Nurses*. "Shirl Conway said at least they should have called it *The Nurses and the Doctors*," noted Turow.

Julia (1968-1971), starring Diahann Carroll, emerged at the height of second wave feminism and in the wake of the Civil Rights movement. "In those days, the designation of 'nurses' indicated professional non-second banana status," said Turow. "Therefore, it was a good place to have an African American actress." The show, a substantial hit, was considered by many to be progressive for its depiction of a professional African American single mother successfully (if sometimes rockily) balancing a career, parenting, friendships, and dating. However, even though Julia worked as a nurse in the health office of



Diahann Carroll starred in Julia from 1968 to 1971, as nurse and a single mother balancing a career, parenting, friendships, and dating.

an aerospace firm, Turow pointed out that the show's focus was not on the details of her career as a nurse, but on her balancing of the personal and the professional. Once again, Julia was, in fact, made "second banana" to her boss at work: a gruff, paternalistic Lou Grant-type who asked questions like "Have you always been a negro or were you just trying to be fashionable?," and made casual, laugh-track inducing statements like "I'm tired of seeing ugly nurses." Although there is much documentation to suggest that *Julia* had a profound influence on many viewers, the show was met with contradictory responses from its black audiences, with some arguing that the show propagated the "Uncle Tom" stereotype. According to Turow, these accusations finally led Carroll to leave the show in 1971.

Turow broadly outlined structural changes that took place on medical shows from 1970 until 2000: the gender and race of physicians became increasingly diverse, there was a shift from the idealization of hospitals to a focus on non-ideal hospital conditions, and, finally, doctors and doctors' personal issues moved to the forefront again. These changes were exemplified by series like *St. Elsewhere* (1982-1988, NBC), *Private Practice* (2007-present, ABC), and *Grey's Anatomy* (2005-present, ABC). As importantly, the shift from network domination to cable programming inspired television producers' growing interest in "niche audiences": perhaps most prominently, women. *Nurse Jackie* (2009-present, Showtime) and *Hawthorne* (2009-present, TNT) have made efforts to portray nurses who are fully realized



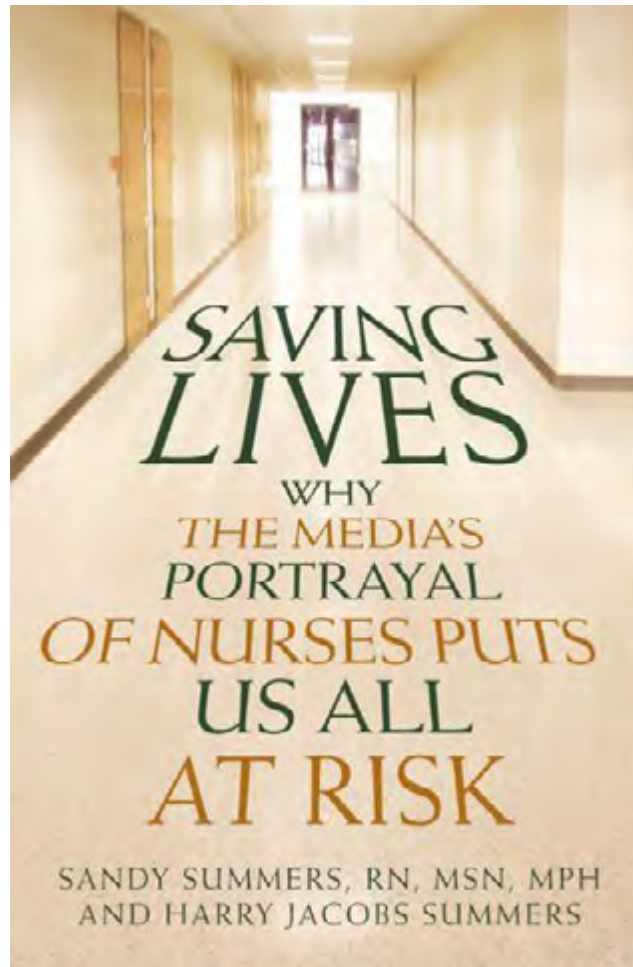
characters. They have also strived to accurately depict the requirements of the job (Summers elaborated on the depictions of nursing in these series, as will be discussed below). While Turow argued that these shows are a step in the right direction, he concluded by stating that the most mainstream depictions of physicians and nurses—those on the major networks—continue to focus on physicians, and relegate nurses to the margins. "Since *ER* there seems to have been a drop in the number of nurses apart from these

shows," said Turow. "On *Grey's* and *Private Practice*, the nurses are faceless people. They simply aren't there." Turow pointed out that television has yet to adopt the concept of the medical team (on which physicians and nurses work together, each serving different, fundamental roles), even though it is a hallmark of contemporary hospitals. Furthermore, Hollywood's historically problematic appropriation of second wave feminism's influence on the workplace may have ironically contributed to nurses' increasing invis-

ibility. "When you have women who are physicians you don't need to have women who are nurses to add some romantic ardor," said Turow.

During a question and answer period that followed Turow's presentation, several in attendance asked what they could do to improve the film and television industries' depictions of nurses. Turow argued that in order to influence the media, proponents of change must make suggestions that would both revise representations *and* appeal to the media industries' "rewards system" (in other words, activists must suggest different kinds of representations that will sell). When one audience member suggested that television depictions of nurses would be highly different if they were created from the perspective of patients, Turow responded: "If you tell someone to do something on the patient's perspective of a nurse, they're going to yawn. When I finished my book I asked writers 'Why don't you do something about the politics of medicine?,' and they said the audience isn't interested. The trick is to figure out how you can propose [such a series in a way that also strongly suggests] that the film will succeed. You're dealing with people who sometimes spend a couple of million on an episode."

Sandy Summers, R.N., M.S.N., M.P.H., the next keynote speaker, demonstrated that nurses can and do strongly influence their depictions in television, film, and advertising from the ground up. Summers is the Founding and Executive Director of The Truth About Nursing, a non-profit organization that seeks to increase public



Summers' recent book argues that most media representations of nurses are not merely offensive, annoying, and in-accurate: they negatively influence the health care that patients receive.

understanding of the central, front-line role that nurses play in modern health care. In particular, the organization's focus is to promote more accurate, balanced, and frequent media portrayals of nurses and increase the media's use of nurses as expert sources. Summers' recent book, *Saving Lives: Why the Media's Portrayal of Nurses Puts Us All At Risk* (co-written with Harry Jacobs Summers) argues that most media representations of nurses are not merely offensive, annoying, and in-accurate: they negatively influence the health care that patients receive in the "real world."

Summers' presentation began with a startling list of data suggesting that the media has contributed to some of the problems that nursing as a profession faces today. She cited a poll in which 24% of participants said that they trusted comedian/Playboy bunny Jenny McCarthy's advice on the dangers of vaccinating children. A study of 1800 private school students taken in 2000 said that boys stopped paying attention when conversations at school about possible career paths turned to nursing because the career didn't pertain to them. The same survey suggested that, because of the media, students felt that they knew more about nurses' love lives than their careers. Another study stated that television depictions of nurses discourage young people from pursuing the profession. Summers argued that these studies exemplify an overall trend in which nurses and their work are devalued and misunderstood, which creates an array of serious problems for health care and its constituents. "If our patients can't respect us, we

can't do our jobs," said Summers. "So we need to build up the respect of the profession so we can enhance nursing care. We are ignored by our colleagues, physicians especially, because they don't respect us." Summers argued that when adults without significant understanding of nursing receive a lifetime of inaccurate, stereotypical messages about the profession, the effects are far-reaching. Public officials and health care decision-makers with little understanding of nurses' importance fail to allocate sufficient funds to nurse staffing, education, and research by, for example, understaffing nurses, which leads to increased patient mortality and promotes a general nursing shortage. She pointed out that there is a dearth of federal funding for nursing. Resident nurses earn one dollar for every 375 dollars earned by resident physicians, and only one dollar out of every 200 dollars in the NIH budget is allocated towards nursing research.

Summers followed her description of this worrisome state of affairs with a comprehensive discussion of the ways in which media (in particular, television shows and advertisements) have repeatedly promoted and naturalized the belief systems that lead to the devaluation of nurses, and its ensuing effects. Clip after clip from hit series like *Grey's Anatomy* (2005-present, ABC) and *House, M.D.* (2004-present, Fox) show physicians "doing all the work" while nurses wander around on the sidelines, mostly cleaning up after them. In one potent example, (Dr.) House is seen caring

for a patient who falls to the floor, leading him to proclaim "Now this is why I invented nurses. Clean up on aisle three!" On a series titled *Off the Map* (2011-present, ABC), a female physician expresses envy that her colleague has gotten to work on challenging medical cases, despairingly stating that "I handed out band-aids today, like a school nurse." In an episode of *Eight Simple Rules* (2002-2005, ABC), a nurse says "Without me, patients could die." When her companion responds "Really?," she says "Well, no, but they could wet their beds."

According to Summers, depictions like these are based on huge misconceptions about what, exactly, nurses do: often, the very jobs that TV shows repeatedly attribute to physicians. "Do physicians do all the healthcare work that matters? That's what it looks like," said Summers. Summers showed a clip from an episode of *Grey's Anatomy* that featured the very common medical show image of a physician successfully defibrillating an unconscious patient.

"Who defibrillates at UCLA? Nurses," said Summers. "Can you imagine if nurses defibrillated on television shows? There would be 16 year old boys lined up around the back to get into nursing school. It's such a high testosterone maneuver. You have to have nerve to do that, but it saves lives. And you have to be smart to read those squiggly lines on the screen. We need credit for the work that we do." Summers counteracted the notion, articulated by Turow, that nurses' work is under-represented on TV shows because it is less flashy and cinematic than that

Summers counteracted the notion, articulated by Turow, that nurses' work is under-represented on TV shows because it is less flashy and cinematic than that of physicians. "Hollywood doesn't think nursing is dramatic enough?" she asked. "They're already showing nursing care all the time. It's plenty dramatic, it's passed the litmus test. But they put it in the hands of physicians."

of physicians. “Hollywood doesn’t think nursing is dramatic enough?” she asked. “They’re already showing nursing care all the time. It’s plenty dramatic, it’s passed the litmus test. But they put it in the hands of physicians.”

Summers emphasized that strengthening representations of nurses in the media will strengthen the nursing profession and, thus, benefit nurses and patients alike. “We’re autonomous professionals,” said Summers. “People don’t know that, they have no idea that we have independent thoughts in the healthcare setting, we intervene to save patient’s lives, we coordinate the healthcare team, we’re educated researchers, educators, and advocates. It is our job to teach the wider public about the value of nursing, because if we don’t strengthen the nursing profession we can’t help our patients to survive... That is why it is important to spread this information through the media.”

Like Turow, Summers praised recent TV series like *Nurse Jackie* and *Hawthorne* which, she stated, are groundbreaking for their accurate depictions of nurses’ work. She showed clips of Nurse Jackie making vital decisions in the treatment of patients, a clip in which Hawthorne kicks out a physician who wants to interview a patient so that she can administer treatment, and another clip in which nurses collaborate in order to assess the best ways in which to treat a critically ill baby (these sequences pointedly counteracted another series of clips in which nurses deferred to physicians, or were presented as powerless and wholly dependent on the instruction of phy-

sicians). Summers stated that her organization doesn’t insist that the media portrays politically correct, idealized nurses, the sorts of characters that people who criticize the notion of “positive representations” are against. In fact, the “angelic nurse” is another stereotype her organization protests. First and foremost, her organization demands accurate, multi-faceted representations.

“People don’t like Nurse Jackie because she’s a bad person, but she’s an excellent clinician,” said Summers. “The series shows that nurses save lives, and though the message may be delivered through a very flawed human being, we still learn through the show what nurses do for their patients... This is great stuff that we need the public to learn.”

Summers finally outlined some of the ways in which her organization has helped to improve representations of nurses, and decrease or revise ones that are offensive and/or in-accurate. In particular, she discussed the ways in which The Truth About Nursing has organized successful press and letter-writing campaigns to protest and revise depictions of nurses on television and in print media. In 2010 the organization launched a campaign in the Associated Press against the reality TV show *Dr. Oz*, which featured a weight-loss segment in which women dressed in provocative “nurse” costumes (fitting the “naughty nurse” stereotype) “got sexy” and danced with Dr. Mehmet Oz. Eventually, the staff of the show issued an apology to the Associated Press, Oz added a nurse blogger to his website, and finally featured an actual nurse on the se-



“People don’t like Nurse Jackie because she’s a bad person, but she’s an excellent clinician,” said Summers.

ries. In response to a commercial for Dentyne Ice gum in which “naughty nurses” were lured into bed by male patients, the organization launched a letter-writing campaign that resulted in 1500 letters of protest. When these letters went ignored, Summers called the top executives at Cadbury Schweppes (who produce the gum) every day for a week, leaving five minute voice-mails explaining why the ad was highly problematic, and promoted sexual harassment in the workplace. After a week, the CEO of Cadbury Schweppes issued an apology and announced that they would pull the ad. When the makers of *E.R.* had the character Abby triumphantly leave her nursing profession to attend medical school, The Truth About Nursing protested “for years” to *E.R.*’s creators, pointing out that there is data showing that nurses who go to graduate school are much more likely to go to graduate school for nursing, rather than medical school. Years later, Sam, another nurse character on the series, went to nursing school.

Summers concluded her speech with a call to action, suggesting that nurses at UCLA should start a chapter of The Truth About Nursing, contribute to the organizations’ letter-writing campaigns, and visit www.truthaboutnursing.org, which features a section titled “100 Things that We Can Do to Improve Images of Nursing in the Media.”

“You guys are right here, right where all of the Hollywood damaging stuff is produced,” said Summers. “Nurses in Bangladesh can’t even get married because they’re equated with prosti-

tutes. That idea comes from here: our Hollywood. I believe it is our civic duty to repair the situation, to improve the world's respect for nursing, so we can do a better job not just helping the lives of nurses, but improving patient care."

After taking in two presentations that powerfully demonstrated the ways in which media representational strategies are both highly problematic and difficult to change, it was refreshing to watch CSW Director Kathleen McHugh's interview with Richard Harding, a film producer passionately dedicated to social justice. Harding is the President and CEO of Sixth Sense Productions and the founder of Malaria Now, a not-for-profit dedicated to protecting children in Kenya from malaria. He played a key role in financing the Golden Globe and Oscar nominated film *Hotel Rwanda* (2004), about a hotel manager who saved 1,000 potential victims of the genocide of the Hutus and the Tutsis in Rwanda in 1994. His most recent project, *The First Grader* (2010), is based on the true story of an 84 year old former Mau Mau resistance fighter in Kenya who takes his government's "education for all" promise literally and insists on being admitted into elementary school, so that he can learn to read. The film was runner up for the People's Choice Award at The Toronto Film Festival, second only to *The King's Speech* (2010). The main focus of the interview was Harding's next project, a film about a group called "The Benghazi Six" in press headlines.



The screenshot shows the website for Sixth Sense Productions Inc. The header features the company logo, which is a stylized eye with a blue flame-like shape inside, and the text "SIXTH SENSE PRODUCTIONS INC." Below the logo is a navigation menu with links: WHAT'S NEW, THE COMPANY, WHO WE ARE, PROJECTS, SCRIPT SUBMISSIONS, PRESS, and CONTACT US. The main content area is titled "THE BENGHAZI SIX" and contains the following information:

- Status: Active Development
- Genre: Political Thriller
- Director: TBA
- Writer: Cynthia Hagan
- Producers: Richard Harding, Sam Feuer
- Synopsis: THE BENGHAZI SIX tells the true story of 5 Bulgarian Nurses and a Palestinian Doctor who have been falsely accused and sentenced to death twice in Libya on charges of deliberately infecting over 400 children with the HIV/AIDS Virus. They were also held accountable for the deaths of more than 50 of those children.

Below the synopsis, there are two paragraphs of text:

Libyan dictator Moammar Khadaffi declared that medics conspired with the American CIA and the Israeli Mossad to maliciously infect the children in order to cause an outbreak of the HIV/AIDS Virus in Libya. The accused, now known as The Benghazi Six, have been tried and sentenced to death twice in a series of trials and appeals. They were held on death row in a Libyan prison until their recent release from prison on July 24, 2007 after more than 8 years in a complicated legal and political battle.

This tragic story combines global politics with human injustice. How a government conspiracy has cost the lives of innocent children while using the 5 Bulgarian Nurses and the Palestinian Doctor as scapegoats, only to cover up a government scandal.

Below is a short documentary:

At the bottom of the page, there is a footer with the same navigation menu and copyright information: © 2008 SIXTH SENSE PRODUCTIONS INC. SITE BY: FROG ON TOP STUDIOS.

Sixth Sense Productions's current project is a film about The Benghazi Six, five nurses from Bulgaria and a Palestinian doctor, who were accused by the Libyan government, led by Muammar al-Gaddafi, of infecting 450 babies with the AIDS virus. It was later proven that the infections were the results of poor sanitary conditions in the Libyan hospital, and began before the Benghazi Six arrived.

The Benghazi Six were five nurses from Bulgaria and a Palestinian doctor who moved to Benghazi, Libya, to work in a hospital and make extra money for their families at home. The Libyan government, led by Muammar al-Gaddafi, falsely accused the group of infecting 450 babies with the AIDS virus. It was later proven that the infections were the results of poor sanitary conditions in the Libyan hospital, and began before the Benghazi Six arrived.

“What happened in the hospital was that Libyan nurses,” said Harding, “don’t feel that little babies have diseases that they can spread to others. So nurses shared needles among babies, and that’s what created the mess. There was no sanitation. These Bulgarian nurses were so well-trained that they could not practice in this way. They brought their own sanitized needles, their own soap, their own gloves, but whatever they did they were threatened, and people said ‘If you don’t like it, go home.’”

Indeed, it has been suggested that one of the reasons that the nurses were singled out is because they fought the dangerous conditions in the hospital. Their identities as both clinical and residential outsiders made them especially vulnerable.

“Gaddafi needed a scapegoat,” said Harding. “And the only nurses he chose were those who came from a country that had no backing from the USA. They chose these nurses because there was nothing that they could do.”

The group was tortured, beaten, forced to confess to crimes that they did not commit, and sentenced to death three times over a period of nine years. “I’ll tell you how bad the torture



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was," said Harding. "I wanted a woman to write the screenplay so it could come from her point of view, and I had two ladies read the treatment. It was raw, nothing was edited, and we gave it to the writers to adapt it so that American audiences could go through it. One of the women called her agent crying and said 'I won't write this because I can't read it,' and another woman said 'I can't write this, it's too horrible.' But these nurses wanted to tell the stories of what they went through—how nurses, who are here to help people, went through this."

The Benghazi Six were finally freed in 2007, after France intervened to liberate them. Harding became interested in making a feature film about the group after his creative partner, Sam Feuer, read an article about them while they were still on Death Row. "The first thing I asked was, what can we do as human beings to free these nurses?" said Harding. "Because these are ladies that were brought to Libya to care for people, to heal people, and for them to be treated in this manner struck me as a great injustice. And making a movie about this was one way to see how we could avoid having something like this happen in the future."

Harding also wanted to make a mainstream film about the Benghazi Six because he felt that the film, and its production, could be instrumental in helping them to get released. "I got the rights while these nurses were on Death Row. I called my lawyer and asked 'How do we go about getting the rights?,' and he said 'Richard, if you were on Death Row, would you be concerned about being in a movie?'" said Harding. So we had to fly to Libya with their sisters and

relatives to get the rights to tell the story, and we said that we'd get behind these people and use our power to support them."

The news of the film's production did, indeed, interrupt the status quo in Libya surrounding their case. "There was an uproar, and I think a lot of it had to do with the fact that these were nurses," said Harding. "It brought a lot of attention to the case. And eventually we were able to get the nurses to give us the rights to make the film. By then the French had gotten on board to help the situation. The headlines wrote 'Hollywood producers come to Bulgaria to help the nurses, and Gaddafi has a heart attack.' Some people said it had to do with the fact that we were making the movie... We got calls once a month from the Libyan embassy asking how we were going to portray them."

Harding stated that, like the Truth About Nursing organization, the makers of the Benghazi Six film are highly concerned with presenting an accurate depiction of these nurses, their jobs, and their story: "These are very strong women, and I give them great credit. 95% of the story is based on what we got from them, and we couldn't write it any other way. For them it is very important that nurses are portrayed very positively, like Sandy was saying, and that is something that we will stand by. We made a promise to the ladies that we would do them right and show who nurses are, and also show the injustices that were done to them."

In the question and answer session with the audience that followed Harding's interview, Summers asked that the film devote at least a small amount of time to showing the nurses

saving the lives of children and to representing them as "autonomous, skilled, educated professionals." "That's one of the things that the nurses requested," said Harding. "That we show them doing positive things, whether saving a life or taking care of kids, and we plan on doing that. I think it's important [that I] be here today to emphasize in my mind how important this is. I don't do TV. But I would love to do a TV show from the perspective of nurses."

The conference's presenters and curators did an outstanding job of painting a portrait of the ways in which nurses have been, and continue to be, represented in multiple forms of media, the cultural reasons for these representations, and their cultural effects. The morning's presentations ended on an encouraging note. Harding's statement that he would take the discourse presented at the conference into consideration while producing the next mainstream movie about nurses demonstrated that events like the conference, and the work of Turow, Summers, Harding, and the institutions with which they are affiliated, are not only important because they increase our awareness of media depictions of nurses and their cultural impact. They are important because they truly have the power to influence them.

"I like you, and I think that the work you are doing is very important," Harding told Summers. "And I hope that I never receive a phone call from you."

Ben Sher is a graduate student in the Department of Cinema and Media Studies and a writer for CSW Update.