

# NURSE

**R**EGULATION **E**DUICATION **P**RACTICE



## **Saint Elizabeths Hospital** Renovation and Renewed Mission



Mistakes Which Cause Delays in Licensure Renewal (page 7)

Providing Quality End-of-Life Nursing (page 13)

Monitoring Media Portrayals of Nursing (page 26)

★ ★ ★ Government of the  
District of Columbia  
Adrian M. Fenty, Mayor







Sandy Summers

# The Truth About Nursing:

## Organization Founded to Monitor Media Portrayals of Nurses

DC NURSE: What is the purpose of your organization and website (TruthAboutNursing.org)?

SANDY SUMMERS: The Truth About Nursing works to change how the world thinks about nursing. For decades the public has thought of nurses in stereotypical terms, and the media both reflects and reinforces those views. People may see us as self-sacrificing angels who clean up the mess but who do little to advance health beyond assisting the heroic physicians, who are seen as the masters of all health care. Alternatively, nurses are portrayed as the naughty sexual servants or playthings of physicians and/or patients. This deep undervaluation of the profession is a root cause of many of the more immediate problems nurses face, including inadequate clinical and educational resources. Why worry about nurse staffing if we're mostly there to fluff pillows and fetch physicians?

The Truth About Nursing raises awareness in many ways, including advocacy campaigns, media analysis and other educational activities, and collaboration with nursing groups and media creators. Our website [www.TruthAboutNursing.org](http://www.TruthAboutNursing.org) is the main vehicle we use to inform nurses, media creators, and the public about how the media is portraying nurses. We post media analyses of what we see and hear, and launch letter-writing campaigns if something is especially damaging to nursing.

We also explore the main stereotypes in our book *Saving Lives: Why the Media's Portrayal of Nurses Puts Us All at Risk*, which has just come out in an updated paperback edition. In the final two chapters of the book we lay out a plan to resolve nursing's image problem. As with any problem nurses face, it's not enough to identify the problem. We've got to come together and educate the world about the true value of nursing.

What was the catalyst for establishing your organization and website?

A group of graduate nursing students at Johns Hopkins, including me, got together in 2001 and had a dialogue about the link between policy decisions that undermined nursing and what we saw was a widespread undervaluation of the profession. We asked ourselves, where does the undervaluation come from, why does it exist? It seemed pretty clear that much of the public disrespect stemmed from the stereotypical media portrayals of nurses and an overall lack of public understanding. We talked about what we might do and decided to form our non-profit organization to make a persistent effort to resolve nursing's image problem.

How do you feel about how nursing is being portrayed in the media in 2010?

It remains generally pretty poor, although there have been some good portrayals and reasons for hope, like the Hollywood nurse shows that appeared in 2009. We wish we could say that nine years after we began, nursing's image problem was mostly fixed! But when you're trying to make such a fundamental change—changing the way people have thought about nursing their whole lives—you're really talking about something on the order of a 50- or 100-year plan. The most popular Hollywood products generally continue to portray nurses as peripheral assistants to the physicians who do everything that matters. Major advertisers worldwide still rely on the naughty nurse, and even the news media tends to portray physicians as the sole health experts, even in areas in which nurses know more and take the lead. I should add that the distortions about nurses are hardly ever intentional; they're almost always based on ignorance. So we've just got to keep reaching out and educating the media and the public

about what nurses really do to save lives and improve outcomes.

I do think nursing's image has made some progress in the past few years. The print media is slightly more likely to consult nurses on its stories. We haven't seen a major mainstream naughty nurse ad in the US in about three years, though there is still plenty of that imagery around. And this past year we had an amazing three—count them, three—nurse-centered Hollywood television shows (*Nurse Jackie*, *Mercy*, and *HawthoRNe*) appear after 15 years without a single one. Each of these new shows, despite some flaws, has included many helpful portrayals of nursing skill and autonomy. So, while it's a long road and we still have much to do, we also think our voices are beginning to make a difference.

The problem is not just that media stereotypes are demoralizing and degrading to nurses and other health professionals. They also send the message that physicians are the only ones who matter, so they're the only ones who deserve funding for their work, that only they deserve seats at decision-making tables on hospital boards or at the National Institutes of Health (NIH). Speaking of the NIH, nurses get only 1/2 of one percent of the NIH budget for nursing research—a true measure of the lack of value society places on nursing. As the largest health profession with leaders working on the cutting edge of health care, nurse researchers need funding for their work. Nursing scholars can't get adequate funding when most people don't know that they exist.

What "hot topics" have you been tackling lately?

We make a serious effort to monitor U.S. television portrayals of nursing and a tremendous number of health care shows have debuted in the past year. The 2009



nurse shows have been the hottest things for us lately since virtually every episode has had something notable for nursing. The physician-centric hospital shows *Miami Medical* and *Three Rivers* broadcast less than a full season of episodes before they were canceled. Also new since 2009 is *Royal Pains* which focuses on a boutique physician, but it generally does not touch on nursing.

Several new shows are slated to appear soon. We're not looking forward to the show *Off the Map*—about health care in the jungle—since the creator Shonda Rhimes has such a poor history of nursing depictions with her shows *Grey's Anatomy* and *Private Practice*. A brilliant medical examiner will be featured in *Body of Proof*, and *ER* producer John Wells is working on a new health show featuring Sissy Spacek, though it is not clear if that show will air. There's also *Cali Nurse*, a new reality show in production featuring angel and naughty nurse images, which recalls Aaron Spelling's notorious *Nightingales* from the late 1980s that nurses managed to bounce off the airwaves with their protests.

What is the source of the best fictional portrayal or [non-fiction] reporting on nursing today?

The new nurse shows *Mercy, Nurse Jackie* and *Hawthorne*. We're sad that *Mercy* was canceled at the end of its first season. But *Nurse Jackie* was renewed for a third season. Both of those engaging shows portrayed a team of nurses tackling patient health problems with autonomy, insight, skill and inventiveness—saving lives and improving outcomes. *Hawthorne* is not as strong dramatically, but also has some good portrayals. Each of the nurse-centered shows has had some problems in depicting nursing autonomy, and some of the characters have personality and even ethical flaws, but the nurses are clinical experts who advocate for them as if they were the nurses' own family members.

The news media has made some slight improvements and will occasionally convey nursing expertise in the key role nurses play

in health care. For example, the influential *New York Times* occasionally runs articles that gives nurses due consideration such as a June 29 article about geriatric care. The BBC has also run several helpful articles about nursing care and innovations. Unfortunately, the vast majority of health news stories remain physician-centric, consulting only physicians even about topics in which nurses have at least as much expertise.

What is the worst portrayal of nursing today?

Unfortunately, on the physician-centric shows, the same themes continue to occur: physicians dominate all health care. Nurses are their servants, losers who are sometimes throw-away love interests, or wanna-be physicians.

*Grey's Anatomy* is probably the worst, though *House* is close. In these shows, every major character is a physician, and nurses are generally just dim or disagreeable servants. On *Grey's* in particular, nurses are

carping second-class losers who have settled for being nurses because they don't have what it takes to be like the heroic surgeons, who provide all meaningful health care.

*Private Practice* had a nurse-midwife, but the show killed him off in May because it did not know what to do with him. Before he died, he got accepted into medical school, which is a standard Hollywood path to success for able nurses, but one that is actually an insult to the nursing profession because nurses are 100 times more likely to attend graduate school in nursing.

*House* is less focused on patient care, but it also suggests that nurses fetch things for physicians and clean up patient messes. Sometimes nurses in these shows exist only below the elbow, so they can hand the physicians equipment so they can use it to perform nursing work. Such depictions send the message that nurses do

*Continued on page 28*



Continued from page 27

nothing meaningful and that if you want to undertake a serious health care career, the only option is medicine.

On both *House* and *Grey's*, brilliant lead characters have mocked nursing, with no real rebuttal.

Don't all professions get "lamboned?" Why should nurses be spared the comedic or dramatic treatment?

Of course, all professions should be subject to fair criticism, but what nurses should object to is the decades of harmful stereotyping that has helped to fuel a global public health crisis. "Just joking" is no defense to harmful slurs in other contexts. We're not saying nurses can't be criticized. There are real problems with nursing that could and should be examined by the media, including nursing errors and occasional weak advocacy for their patients. We welcome fair criticism by the media. Public scrutiny of these issues can only help make nursing stronger.

But we object to stereotypes of nurses. No thinking person would accept racial or gender stereotypes along those lines. But society seems too eager to accept stereotypes of nursing as being low-level "women's work," and nurses may be depicted as scut work servants or in-hospital prostitutes. The sexy angle for nurses hurts nurses since it implies providing sexual services is a part of nurses' jobs—some sort of in-hospital prostitutes. Sexiness associated with men just makes them look more attractive.

Many professions in which popular culture takes an interest also suffer from media stereotypes. There are frequent depictions of greedy, unethical lawyers, sexy firefighters and brilliant physicians. But depictions of lawyers are not all bad. They fight for justice, are smart, committed advocates for justice. And real lawyers are rich and powerful, so whatever stereotype they've suffered, it doesn't seem to have harmed them. There's no global lawyer shortage. That firefighters are depicted

as macho and sexy hasn't harmed them, no one thinks it's their job to have sex, as they do with nurses. Rather the sexiness associated with firefighters makes them look strong, virile and manly—it makes them a prize romantic catch.

And frankly physicians haven't been lampooned by any media, they're consistently stereotyped as brilliant and expert, doing all the work of substance. They may be flawed, three dimensional characters, but they save lives, they're autonomous cowboys and girls. Their competence is rarely if ever questioned, even when the character is despicable. So the media has been a boon to them for many decades.

Of course, nurses aren't the only ones who are harmed by stereotypes. The National Association of Social Workers has recently launched [socialworkerspeak.org](http://socialworkerspeak.org), a website that monitors the media for negative stereotypes about social workers and encourages action to counteract the stereotypes.

When you do speaking engagements and communicate with nurses, what frustrations do you detect with regard to how nurses feel about the media?

Many nurses I speak with realize the media depictions of nursing are pretty bad, but they seem to regard our media image as something completely beyond our control. They think influencing the media is about as easy as moving the Atlantic Ocean. And some don't seem to understand why the media matters. So instead of joining us to work on it, they ask us why we don't focus on problems they see before them like high patient loads and mandatory overtime. But our answer is that *we do* focus on these problems—by changing how people think about nursing. The decisions to overload nurses come from human beings who undervalue nursing care and are ignorant of nurses' ability to save lives. So decision-makers overwork nurses, ultimately leading to bad patient care and miserable nurses.

Many decisions that harm nursing happen because society believes that nursing

isn't really all that difficult or important. "You can probably empty more than 10 bedpans a day, I'll bet you can empty 20!" Decision-makers don't know what we do, so they don't value it, so they don't give us the resources we need to do our work right.

But if we improve media depictions of nurses, it will increase the value decision-makers place on nursing. We have to change assumptions about nursing, and that starts with the media and conversations families have with each other about the value of different careers.

One of our challenges is to get nurses motivated to start chapters of The Truth About Nursing in their home towns (we don't have a DC chapter yet!—volunteers?) and work to help us change how society thinks about nursing. Our small organization has been able to affect many depictions of nursing in the media. We have a long way to go, but if more nurses join us in speaking out to the media and the public about the value of nursing—we will get there one day.

Are there any producers in Hollywood who used to practice as full-time nurses?

The three nurse-centered shows have each had nurses as producers and it's clear they have offered valuable input. There are a few errors, especially in relation to nursing autonomy, but for the most part, the shows understand nursing. The physician-centric shows also have nurses on staff, and sometimes they get a producer credit, but these nurses do not appear to be consulted on the scripts, or in any case, the scripts do not reflect a meaningful effort to portray nursing fairly. This is where it generally all goes right or wrong, so this is where nurses who are willing and able to advocate for their profession are most needed. Instead, the physician-centric shows have nurses on the set showing the actors who play physicians how to perform all the nursing work accurately. So their work undermines nursing. I wish all nurses would refuse to help these shows when they portray physicians doing the work that we really do.



As a person who is bringing awareness to an issue of importance for nursing, could you address your feelings about the saying "One person can make a difference?"

In 2006, Francine Brock of California visited Wynn Las Vegas Casino and came across its Nurse Follies slot machines that featured naughty and battleaxe nurses. She later wrote to the casino, and with that one letter, she was able to convince the owners to convert the slot machines to themes that were not nurse-related—a measure that cost the casino about \$20,000. Not all letters have this power, but if we don't speak, we can't expect change to happen.

In our mission at the Truth, we sometimes find it so hard to convince nurses to join our mission. But in our years of advocacy, we have convinced many media makers, including the U.S. government, Cadbury-Schweppes, Heineken, Wal-Mart, CVS, Skechers and many others to change their depictions of nurses to ones that did not degrade us.

This task is big, but it isn't as big as moving the Atlantic Ocean. A Chinese parable says that if you want to move a mountain, you've got to begin with a tiny pebble. Hey, we've moved a bunch of wheelbarrows full of dirt by now. If we all grab our shovels, we can create a more

robust and accurate image of nurses. We shouldn't do it just for ourselves or even for the next generation of nurses. We should also do it *for our patients*. As their advocates, it's our job to provide them with better nursing care than we are currently able to deliver. But we can't do it until we first make our profession stronger. Please join us at [www.TruthAboutNursing.org](http://www.TruthAboutNursing.org). We can do it—if you help. We'll look forward to having you join us. Thank you.

Sandy Summers, RN, MSN, MPH is executive director and founder of The Truth About Nursing and co-author of *Saving Lives: Why the Media's Portrayal of Nurses Puts Us All At Risk*.

## Protecting Patients From Rogue Internet Drug Outlets: Search Engines Now Require Vipps Accreditation

The National Association of Boards of Pharmacy® (NABP®) congratulates Yahoo!, Google, and Microsoft's Bing.com, three major search engines, for their decision to improve their standards for Internet pharmacies seeking to advertise online. These search engines now limit their online pharmacy advertisers to those that are VIPPS<sup>CM</sup> (Verified Internet Pharmacy Practice Sites<sup>CM</sup>) accredited. Internet pharmacies that are not accredited by program will no longer be permitted to display advertisements in the US Sponsored Search results for these search engines.

Since the advent of its VIPPS program more than a decade ago, NABP has been working to protect patients from rogue Internet drug outlets that circumvent pharmacy laws and practice standards established to protect patient health. In February 2008, NABP began an intensive study of Web sites selling prescription drugs and has found that, of the more than 5,000 Internet drug outlets NABP has reviewed,

96% appear to be out of compliance with pharmacy laws and practice standards. These sites dispense dangerous prescription drugs to patients without a valid prescription or medical oversight. The drugs are often unapproved for sale in the US – or any other developed country – and are often substandard, contaminated, or counterfeit.

By contrast, VIPPS-accredited pharmacies have undergone and successfully completed the NABP accreditation process, which includes an on-site inspection of all facilities used by the site to receive, review, and dispense medicine.

NABP has also developed a complementary program, the NABP e-Advertiser Approval Program, that identifies legitimate Internet advertisers that offer only limited pharmacy services or other prescription drug-related services online.

More information go on the NABP Web site, [www.nabp.net](http://www.nabp.net).

A member of Nurses Service Organization (NSO)\*\*  
\*\*NSO may cover most of your attorney fees.

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If you or a colleague is in need of an Attorney to represent you before the D.C. Board of Nursing or FOR ANY OTHER LEGAL MATTER, Call a Nurse Attorney for a confidential consultation.

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