

# Reaching out: Organizational structures and public communication of nursing professional associations and trade unions in Portugal

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## Abstract

**Aim:** To describe the organizational structure and resources for strategic mediacommunication of nursing professional associations and trade unions in Portugal.

**Design and Methods:** Quantitative study, with a cross-sectional, exploratory/descriptive design. From October to November 2017, a questionnaire was sent to 21 nursing professional associations and trade unions in Portugal. Eleven (52.4%) organizations replied: nine professional associations and two trade unions.

**Results:** The participating organizations rely on basic structures regarding strategic communication: 54.5% of them have less than 500 members; 63.6% of them have no communication budget; 54.5% of them have no formal communication structure, and only 27.3% of them hold events for the purpose of media coverage. Consequently, most of these organizations have occasional interactions with journalists, create messages about nursing problems, and directed mostly to nurses, perpetuating a circular communication.

**Conclusion:** Nursing professional organizations have limited resources and lack of formal communication structures. The restricted interaction with the media and the "echoing" voice that propagates within the profession may hinder citizens' full understanding of its contribution. Nursing organizations must develop a nation-wide strategy that promotes transversal collaboration and resources optimization, with the purpose of increasing their media visibility and strengthening their Public Health mission.

## KEYWORDS

media visibility, nursing professional associations, nursing trade unions, public communication, strategic communication

## 1 | BACKGROUND

Nurses are the largest occupational group in the health sector and play a key role in promoting the well-being and quality of life of the

populations they care for. They integrate multidisciplinary teams which work in a variety of settings (hospitals, outpatient departments, conflict scenarios, etc) and provide more than 80% of primary health care in some countries.<sup>1</sup> They promote public health and health literacy by ensuring vaccination and education for self-management in areas such as diabetes, obesity, and cardiovascular

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problems.<sup>2</sup> In addition to direct patient care, nurses are also responsible for quality improvement programs, management development, teaching, and audit activities, and are actively involved with health policy.

Despite nurses' major contribution to the economic and social development of a country, they are usually missing from the media coverage of the health sector and, consequently, kept away from public discussion.<sup>3-6</sup> Mason et al<sup>4</sup> analyzed 537 articles from 13 American health publications and concluded that nurses were identified as sources of only 2% of quotes in the articles, were mentioned in 13% of stories, and were identified in 4% of images in the articles. The authors concluded that 20 years after the initial study, which found the profession was almost invisible, there were no significant changes in the profession's representation in the media.<sup>4</sup> Media invisibility and unfavorable representations can negatively influence the choice of nursing as a profession, contribute to resource allocation, and violence against nurses, leading to recruitment and retention problems, with an impact on safe staffing, and professional dissatisfaction.<sup>7-9</sup> It can also affect political decisions and labor negotiations: governments can legislate as a response to the newspaper discourse about the controversial issues involving nurses, instead of putting forward concrete solutions for the underlying problems.<sup>10,11</sup> If the news is considered to be a representation of power and nurses tend to be invisible in health media coverage, it can be concluded that they have a limited ability to influence the public and media agendas.

This social invisibility is caused by factors related to nurses (as sources), journalists (as builders of social reality), and other news sources (in permanent competition for the definition of the meaning of the events). Nurses tend to communicate the profession's views by exposing their problems (such as nursing shortage and safe staffing), which prevents the public from understanding what they know and do as nurses.<sup>5</sup> Graveto et al<sup>12</sup> explored the frequency of nurses' interaction with the media by building and validating the Scale of Media Use Behaviors by Nurses in a sample of 528 Portuguese nurses. This 23-item Likert-type scale describes ways of interacting with the media (such as writing press releases or inviting the media for professional nursing events). Nurses reported a mean frequency of 6.24 out of 92 possible points, which suggests limited participation in the public space.

Journalists seem unaware of the scope of nursing as a profession and job market.<sup>3,4</sup> Health care organizations do not appoint nurses to provide information to the media and journalists tend to choose other health professionals even when the nurses are the experts on the subject matter.<sup>9,13-15</sup> The tendency for journalists to choose previously known sources (and taken as legitimate), with more prestige and closer to their cultural background and experience, is another factor influencing the lower use of nurses as sources of information.<sup>6,14,16</sup>

Sources, as an interested party in the production of news suitable to them, fight for media coverage and access. According to Darde,<sup>17</sup> there are different types of sources and their access to journalists is not evenly distributed. Thus, sources with economic, institutional, and sociocultural capital (in the form of authority), as well as

communication strategies and tactics have easier access to the media and are able to influence how the events are represented and interpreted.<sup>18</sup> In Portugal, the production of health news is usually based on almost the same official, male sources, and nurses are rarely identified.<sup>6,13,14</sup>

The triad of actors and their attitudes (nurses' low interaction with the media, journalists' lack of understanding, and competition from other sources for the representation and interpretation of events) may partially explain the phenomenon of media and social invisibility of the nursing profession. Less attention has been given to how nursing professional associations and unions organize themselves regarding interaction with the media. These organizations talk on behalf of thousands of nurses and therefore are perceived to be more legitimate news sources than the individual nurse. But how frequently do they address the media? How do they craft nursing messages to reach broader audiences? What is the role of social media and digital platforms in the communication strategy?

There are currently no studies on nursing organizations' resources for strategic communication with the media and their impact on the social and media visibility of the profession.<sup>7</sup> In this paper, we aim to understand the organizational structure and resources for strategic media communication of nursing professional associations and trade unions in Portugal. Upcoming articles will analyze the process of message creation, the barriers and facilitators of media interaction, and the role of social networks in the nursing organizations' communication strategy. The advancement of knowledge in this area will enable nursing organizations to design, implement, and assess effective public and media communication strategies.

## 2 | METHODS

### 2.1 | Study design

This is a quantitative study with a cross-sectional, exploratory/descriptive design.

### 2.2 | Population and sample

In September 2017, an online search was performed to find Portuguese nursing professional associations and trade unions. Six trade unions and 35 professional associations were identified. Of the six trade unions, two were automatically excluded (*Associação Sindical Portuguesa dos Enfermeiros - ASPE* and *Sindicato Democrático dos Enfermeiros de Portugal - SINDEPOR*) for having started operating less than a year ago. The following inclusion criteria for these organizations were applied: bylaws showing that public communication is an integral part of their mission and values; development of activities involving communication with the citizen/society; nurse members only; having been operating for more than 1 year; evidence of organizational activity in the past year. Associations which had other members besides nurses and included other health professionals in their structures were excluded. This decision was based on the fact

that some associations are dedicated to cross-cutting health topics, making it difficult to identify the professionals who are responsible for events and communication.

Of the 39 associations and trade unions, 21 met the inclusion criteria and were invited to participate via e-mail and/or telephone. Of the 21 organizations, 6 did not reply and four of the remaining 15 organizations did not accept to participate. Thus, the final sample was composed of nine nursing professional associations and two nursing trade unions in Mainland Portugal and in Madeira and the Azores.

### 2.3 | Instruments

An online questionnaire was applied. Two versions were designed based on a literature review: one for trade unions and another one for professional associations. The questionnaire was composed of five dimensions: organizational characteristics (number of members, internal structure, funding sources, and use of volunteers); public communication (communication department, spokespersons, topics publicized by the organization, and communication strategies); organization of public events (event planning and activities covered by the media); interaction with journalists (frequency of interaction, interaction strategies, and satisfaction with interaction); and online communication platforms (websites and social networks of the organization and how they are managed). The questions were analyzed by a panel of Portuguese experts in nursing, social communication, and communication sciences, including a PhD researcher of the Nursing School of Coimbra, a PhD researcher of the University of Porto, and a researcher holding a master's in communication sciences. Data were collected between November 2017 and January 2018, in a total of 11 questionnaires.

### 2.4 | Formal and ethical procedures

The participants were informed about the study and its objectives, as well as the voluntary nature of their participation. The liaison person at each organization signed an informed consent form, which was sent to the principal investigator. This study was approved by the Ethics Committee of the Health Sciences Research Unit: Nursing (UICISA: E) of the Nursing School of Coimbra, Portugal.

The first questionnaire item aimed to ensure anonymity and confidentiality. Two organizations expressed their right to anonymity, so names will not be mentioned during the presentation and discussion of these results. The organizations will be identified by the letter "O" followed by a randomly assigned number.

## 3 | RESULTS

Of the 21 organizations that met the inclusion criteria (Table 1), the participation rate was 52.4% ( $n = 11$ ).

More than half of the organizations (63.6%) had started operating before 2000, with the most recent one being founded in 2012. The number of members ranged from 12 to 71 753. Approximately 18.2%

of the organizations had less than 100 members, 36.4% had 100 to 500 members, 18.2% had 1000 to 1200 members, and 18.2% had more than 10 000 members. The city with the highest number of headquarters was Lisbon ( $n = 6$ ), followed by Coimbra ( $n = 2$ ). The majority (72.7%) of the organizations were not organized by clusters or specialized centers and only one had a cluster linked to communication. The management structures are composed of nurses with a PhD degree (36.4%), a master's degree (54.6%), and the title of specialist (54.6%). Six organizations used volunteers (54.5%): four were exclusively composed of volunteers (>10 members) and in the remaining two organizations volunteers collaborated in event planning (<5). Membership contributions represented part of the funding of these organizations; six organizations obtained funding through sponsorships, two through their own capital, one through its journal, and another one through governmental grants/support. As regards the public communication budget, four organizations (36.4%) reported using 1% to 25% of their total budget and seven had no specific budget for public communication.

In the dimension "public communication," the majority of organizations (54.5%) had no communication structure. Only two organizations had a communication department and a communication

**TABLE 1** Organizations that met the inclusion criteria

Nursing organizations
Associação Católica de Enfermeiros e Profissionais de Saúde (ACEPS)
Associação Científica dos Enfermeiros (ACE)
Associação de Enfermagem Oncológica Portuguesa (AEOP)
Associação de Enfermeiros de Salas de Operações Portuguesas (AESOP)
Associação de Enfermeiros Especialistas em Enfermagem Médico-cirúrgica (AEEEMC)
Associação Nacional de História da Enfermagem (ANHE)
Associação Portuguesa de Enfermagem Forense (APEForense)
Associação Portuguesa de Enfermagem Militar (APEM)
Associação Portuguesa de Enfermeiros (APE)
Associação Portuguesa de Enfermeiros de Cuidados de Saúde Primários (APECSPP)
Associação Portuguesa dos Enfermeiros Especializados em Enfermagem de Reabilitação (APEEER)
Associação Portuguesa dos Enfermeiros Gestores e Liderança (APEGL)
Associação Portuguesa dos Enfermeiros Obstetras (APEO)
Ordem dos Enfermeiros (OE)
Sindicato de Enfermeiros da Região Autónoma da Madeira (SERAM)
Sindicato dos Enfermeiros (SE)
Sindicato Independente dos Profissionais de Enfermagem (SIPE)
Sindicatos dos Enfermeiros Portugueses (SEP)
Sociedade Portuguesa de Enfermagem de Saúde Familiar (SPESF)
Sociedade Portuguesa de Enfermagem de Saúde Mental (ASPESM)
Sociedade Portuguesa de Enfermagem Oncológica (SPEO)

chairperson and outsourced this type of services. Three organizations had a communication department, but a member of the staff had no specific training in public communication. Although five participants reported that public communication was a priority area, only one (9.1%) had specific facilities/infrastructures for this area. The priority was justified by the need to disseminate their activities to the public and the members (O4, O5, O7, and O10), promote prevention campaigns (O5), and establish close relationships with the journalists (O11). Two (18.2%) organizations monitored their media coverage. As for their spokespersons, 45.4% (n = 5) of the organizations assigned this role to specific members for long periods of time. The remaining organizations selected their spokespersons according to specific needs; most of them (72.8%) had no training in public communication. In nine organizations (81.8%), members were both part of the management structure and spokespersons.

When questioned about their target publics, less than half of the organizations (45.5%) mentioned citizens or other groups besides nurses. The organizations discussed topics related to their areas of activity and most of them about the nursing profession. They compete with other associations for the same topics (54.5%) and, in most cases (71.4%), this competition is done by associations from within the profession.

As for the means of communication, all organizations used the e-mail (including mailing lists), had their own website and social media profile, and held public events (such as conferences and debates) to reach their target audiences. Eight organizations held general meetings and information sessions for their members; two communicated through their journal, and one paid for advertising space. The organizations worked with various institutions from within and outside the profession: educational institutions such as universities, polytechnic institutes, and nursing schools; institutions of the health sector such as the Ministry of Health, the Directorate-General for Health, and hospitals; and other institutions such as the Ministry of Justice and city halls.

In the dimension "organization of public events," only three (27.3%) organizations held events with the purpose of obtaining media coverage (such as the celebration of special days or public demonstrations) and approximately 72.7% of them did not organize more than three public events per year. Only three organizations were able to get media coverage for four or more events per year: conferences, scientific events, community outreach activities, series of debates, meetings with the government, and public demonstrations were the events with greater media coverage. When asked about the most important events in the past 5 years, they mentioned their conferences (n = 7), the celebration of national and international special days (n = 3), awareness-raising campaigns (n = 2), exhibitions (n = 1), participation in television programs (n = 1), and trade union's rallies (n = 1). Of these events, the international days (of the nurse, multiple sclerosis, the person with disabilities) were those which had greater media coverage.

With regard to the organizations' interaction with the media, only one (9.1%) established contact on a daily basis. Three (27.3%) established contact on an annual basis and two (18.2%) on a monthly basis. The members who were contacted more often were available

journalists (54.5%), journalists specialized in health (45.5%), and editors-in-chief (45.5%). Most of the organizations (81.8%) established direct contact with the journalist or sent news releases (54.5%). The frequency with which the organizations were contacted by the media was also low: one of the associations (9.1%) was contacted every day, two once a month, and three once a year. The organizations were available via e-mail (n = 10), telephone (n = 10), and social networks (n = 6). The majority of organizations (63.6%) reported that the interaction with journalists was occasional and two of them (18.2%) reported that it was very frequent. Despite the low frequency, the majority of nursing organizations reported being satisfied or very satisfied (63.6%) with the nature of the interaction with journalists. One of the associations (9.1%) provided training for journalists on its internal functioning and the nursing profession and proposed meetings and informal lunches for that purpose.

In the dimension "online communication platforms," all organizations reported having an active website managed by active members (n = 4), members of the communication departments (n = 3), computer engineers (n = 2), and board members (n = 2). These websites provided news about the life of the organization (n = 11), future events (n = 11), position statements (n = 8), professional training (n = 6), and news from other media (n = 5). No contents directed to the common citizen were mentioned. In relation to social networks, all organizations had an active Facebook account and three of them had a Twitter account. These networks were mostly managed by board members (n = 5), active members (n = 3), and members of the communication departments (n = 2); in one organization, they were managed both by board and communication department members. Future events, position statements, and news about the life of the organization were the most frequent contents shared on social networks. The frequency with which the organizations were contacted through social networks was also low, with most of them (n = 6) being contacted on a monthly to quarterly basis.

## 4 | DISCUSSION

Some characteristics of these nursing organizations can strongly interfere with their external communication (directed to broader audiences). They have a small number of members (mean of 184 in 54.5% of associations), most of these just being passive members with no active role within the associations: this determines a lower ability to shape health and nursing policy issues.<sup>19</sup> Most organizations depend on voluntary work and four of them rely solely on volunteers, which suggests an important division of time and resources between the profession and the associative activity.

Funding comes mainly from membership contributions and sponsorships: the small number of members suggests that the economic resources of these organizations tend to be modest. According to Pinto<sup>16</sup> and Lopes et al,<sup>14</sup> access to specialized communication services is closely linked to the organizations' economic power. The fact that nursing organizations have a limited income and that their strategic communication is often regarded as a

less important area of management<sup>13</sup> may help to explain the fact that 63.6% of them have no specific funding for communication activities and that only one of them provides specific infrastructures for these activities. The majority of spokespersons are selected according to specific needs and most of them (72.8%) have no training in public communication. Communication departments have privileged access to the media because of their knowledge of the journalistic routines and the delivery of specific information,<sup>20</sup> thus the lack of communication departments in nursing organizations can hinder the planning, implementation, and evaluation of public communication and media activities.

The participating organizations have nurses as their primary target audience (through congresses, workshops, and conferences), while less than half reported aiming their activities at both citizens and health service users. This tendency may be explained by the nature of the organizations: the majority can be designated as "specialty associations" because their main focus is continuing education in a given clinical area.<sup>21</sup> A reasonable amount of the topics brought to the public eye are related to professional issues: professional career, management, safe staffing, regulation, and nursing care delivery to specific populations. Many of these topics are shown in the media as problems,<sup>4,6</sup> such as nursing shortage, insufficient staffing, or occupational problems, which prevents society from understanding the key role of nurses in the health care landscape.<sup>5</sup> Nursing organizations give their opinion on broader topics being discussed in the public sphere (domestic violence, patient safety, sustainability of the National Health Service, and health reforms) but they do not always get media coverage for them.

Creating events is an important activity for nursing organizations since these events may generate media coverage and public awareness over the subject or the organization.<sup>22(p55)</sup> agrees with this idea, explaining that "events are the starting point for building media frames." In this study, only three (27.3%) organizations hold events with the purpose of obtaining media coverage and the majority of them (72.7%) do not organize more than three public events per year, showing a limited capacity of building media frames related to nursing events. Congresses (aimed at nurses) and celebrations of national and international days receive more media attention: the latter aimed at raising the common citizen's awareness of issues related to the organization and its area of activity.

The nursing organizations in this study are rarely requested to be the news sources (63.6% are contacted every 3 months to once in a year), confirming a trend that has been observed in recent years: although they are the largest professional group in the health sector, nurses were quoted only 1.6% of the 6936 health texts analyzed between 2012 and 2013 in Portugal.<sup>20</sup> Even if seven organizations stated a small interaction with journalists, the same amount reported being highly satisfied with it. The predominance of the medical and gender discourse in the public sphere,<sup>23</sup> the journalists' preference for information adapted to their needs (prepared by communication offices) and official sources,<sup>13,20</sup> the use of the same sources by different journalists,<sup>14</sup> nurses' low social status, and the reproduction of society's power structures in the media<sup>20</sup> may partly explain the low

interaction between the media and the nursing organizations in this study. The characteristics of nursing organizations in terms of strategic communication, as described above, may also concur with this reality. Framing nursing messages in an attractive way, understanding journalists' routines, cultivating relationships with local and national media, and being media savvy are key strategies to improve public understanding of the profession and foster citizen engagement.<sup>7,15</sup>

All the participating organizations were present in the digital media (through their website and Facebook page). Only three organizations had an active Twitter account. Marôpo, Henriques, and Jorge<sup>24</sup> highlight some of the advantages of these platforms: the direct contact with the public (bypassing the media filter), the possibility to educate citizens about health-related issues, and the guarantee that the statements issued by the organization members are not misused by journalists. However, the participating organizations use these platforms to communicate mainly with their members: predominance of contents about events and news about the organization and, in fewer cases, information for the citizens. Nursing organizations display a preference for internal communication in both traditional and digital media, which promotes and perpetuates a circular conversation within the nursing profession. Girvin et al<sup>7</sup> reiterate that nurses should enhance the use of social media to influence beyond the traditional organizations and hierarchical relations within them. Engagement with social media should be planned and include goals, target audiences, type of social media, branding, measurement, and evaluation methods.<sup>25</sup> These platforms allow for direct communication with the citizens, which may be used as an alternative solution to the difficulties of the profession in asserting itself in the public sphere.

## 5 | CONCLUSION

Nursing organizations (professional associations and trade unions) "are an effective means by which the nursing profession can influence health care policy, represent, and protect the interests of nurses, provide continuing education opportunities for nurses, and advocate for the highest quality care possible to the public."<sup>26(p108)</sup> Fulfilling these missions will become easier if these organizations are able to communicate effectively with their members, the public, and the political representatives. In Portugal, the strategic communication of most organizations is marked by specific characteristics: they have a reduced number of members, limited funding, basic structures of public and media communication, and reduced, but satisfactory, interaction with the media; the organizations' external communication is directed mainly at nurses (an inward-looking voice) and social networks' contents are also directed at them. This context is similar to that found in other countries and may hamper the profession's ability to influence public policy and to get the resources necessary for the provision of safe and quality care.

The lack of knowledge in society about the nursing profession is the reality for most western countries and the literature points to the need for nurses to be more proactive in transforming their public

image.<sup>9,27,28</sup> To improve the public's understanding of nursing, Girvin<sup>27</sup> draws a parallel with science: these areas are so important and pervasive in our lives that understanding them will contribute to improving health and reducing the risk of complications. The author argues that nurses have a lot to learn from scientists about public communication: media training, briefing, influence with government, and engaging young people are strategies that have contributed to the dissemination of science. Nurses have a major potential to influence governments' health policies, but their media invisibility is limiting this potential.<sup>28</sup> These professionals and their organizations must establish a medium- to a long-term plan aimed at public interaction, going beyond the traditional definitions of health and illness and the marketing campaigns.<sup>7</sup> Portuguese nursing organizations must develop a nation-wide strategy that promotes transversal collaboration and resources optimization: this may include sharing press relations and media training resources between high and low-income associations, defining which media-related competencies should be taught by which organization and fostering academic events on this subject.

This study had some limitations, so it is important to be cautious about generalizing the results: the number of organizations may not be representative of the national and international realities; the selection of specific nursing associations prevents the comparison with other associations of the health sector and their communication strategies; and the mission and goals of the so-called "specialty associations" influence some aspects of public communication. To minimize these limitations, these organizations were exhaustively described from a strategic communication standpoint, and a literature review on public communication in third sector organizations was performed.

Today, highlighting the need for the nursing profession to communicate more and better with the media is not enough.<sup>27</sup> Whether in Portugal or in other countries, nursing leaders and their organizations must establish a joint strategy that prioritizes strategic external communication: only a multilevel, transversal, and collaborative initiative between nursing schools, unions, associations, and health care institutions will be fruitful. By successfully projecting their voice and influence into the public and policy arenas, nurses will be able to contribute to more equitable and healthier societies.

## CONFLICT OF INTERESTS

The authors declare that there are no conflict of interests.

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