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## Communication, Collaboration, and Teamwork among Health Care Professionals

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# Communication, Collaboration, and Teamwork among Health Care Professionals

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## I. Introduction to the Field of Health Communication

Health communication is a vital topic for research because everyone either interacts with health professionals, encounters health-related messages in the media, has suffered from a serious illness, or has experienced a loved one with a life-threatening or terminal illness (Sharf, 1993). Our experiences with health and illness are significant to our sense of self. Two journals in the field of communication, *Health Communication* and the *Journal of Health Communication* publish research exclusively on communication topics within health care, public health campaigns, and related issues. Additionally, mainstream communication journals such as *Journal of Applied Communication Research* and *Communication Monographs*, also publish articles on health communication. Journals in a range of other disciplines cover health communication topics, such as *Health Psychology*, *Sociology of Health and Illness*, and *Qualitative Health Research*. Both graduate and undergraduate communication curricula in universities across the U.S. commonly include health communication courses, and there is a growing market for textbooks in the field. Three excellent introductory textbooks written by communication scholars include Beck's (2001) *Communicating for better health: A guide through the medical mazes*, du Pre's (1999) *Communicating about health: Current issues and perspectives* and the forthcoming (October 2002) *Communicating health: Personal, cultural, and political complexities* by Geist-Martin, Ray, and Sharf.

At the same time that professional interest and research is expanding, public awareness of health risks and disease prevention is at an all time high (Sharf, 1993; du Pre, 1999). With the proliferation of managed care in the U.S., patients are becoming more active in their own care. The popular press is rife with articles on a wide range of health care issues (e.g., Strauman,

2001). These popular press topics (e.g., managed care, physician-patient communication) mirror health communication research areas.

Health communication research began in response to physicians' frustration with patients who did not comply with physicians' orders or recommendations. Physicians wanted to know why this was so, and enlisted the assistance of medical sociologists to study what strategies would be most effective in persuading patients to obey physicians (du Pre, 1999). Communication between physicians and patients continues to be one of the most researched topics within health communication. Traditionally, health communication research has focused on three main areas of research: physician-patient communication, health information dissemination (e.g., media campaigns to promote smoking cessation, encourage early cancer screening), and social support (Sharf, 1993). Over time, the field developed a broader focus. The focus of the health communication field is now large and varied, and, in addition to traditional topics, includes research on health care teams, collaboration within health care, the organization of health care institutions, the communication effects of managed care, communication between health care institutions and members of disenfranchised groups, and transnational comparative studies of health care systems. Health communication research has been, and continues to be, interdisciplinary, with researchers located in the fields of medicine, sociology, psychology, communication, anthropology, public health, social work, and nursing (du Pre, 1999).

In the remainder of this essay, I explore one particular aspect of health communication research: communication among health care professionals from different disciplines in pairs, small groups, and teams. Multidisciplinary and interdisciplinary health care

teams have become standard practice in many aspects of health care provision, particularly geriatrics. The majority of the research reviewed here comes from U.S. researchers; however, I incorporate research on teams from New Zealand, the United Kingdom, Sweden, and Australia. I begin with an overview of theoretical approaches to studying health care collaboration and teamwork. I then review literature on inter-

professional collaboration between physicians and other types of health care and social services providers. Next, I explore the nature of teamwork in health care, particularly as it relates to cross-disciplinary communication and boundary negotiation. Finally, I provide a perspective on the state of research in health care collaboration and teamwork and offer suggestions for further research.

## II. Theoretical Approaches

Traditionally, health communication research has been largely quantitative and positivist in its orientation (e.g., du Pre, 1999; Vanderford, Jenks, & Sharf, 1997). Health communication research historically has reflected a biomedical perspective that privileges the physicians' perspectives and puts physicians' (not patients') concerns at the center of the research (Sharf, 1993; Thompson, 1994). Although much work remains quantitative with its emphasis on controlling and predicting behavior, researchers of health care teams have integrated a range of theoretical and methodological approaches into their work.

According to Sands (1993), four main approaches to studying health care teams include group dynamics, systems, collaborative or consensus, and constructivism (Sands, 1993). The group dynamics model positions a team as a small group in which norms, roles, and communication patterns are studied (e.g., Hannay, 1980). Communication scholars using this approach tend to focus on decision making in groups (e.g., Sabourin & Geist, 1990). Systems theorists see the team as a system with subsystems (disciplines) that is embedded within a suprasystem (hospital or other health care organization), with roles and responsibilities shifting over time to achieve homeostasis of the system (e.g., Estes, 1981; O'Connor, 1980). Collaborative/consensus approaches to understanding health care teams emphasize shared responsibility and consensus building among team members (Mailick & Ashley, 1981). This approach seeks to foster decision making as an egalitarian process with all members having input towards reaching a common goal.

A broad and commonly used theory is social constructivism. Constructivist theorists propose that meaning is constructed through language in interaction (Berger & Luckmann, 1966; Gergen, 1994; Hacking,

1999). This approach to research is valuable for looking at teams because it draws attention to the complex ways in which health care teams construct the meaning of their work, of the team itself, and of their patients through communication about cases, research, and clinic practice (Sands, 1993). Indeed, "Communication is not just a tool that groups use; groups are best regarded as a phenomenon that emerges from communication" (Frey, 1994, p. x).

Many communication researchers use *bona fide* group theory, which is compatible with a broad constructivist approach. Putnam and Stohl (1990) define *bona fide* groups as naturally occurring groups that have stable but permeable boundaries and are interdependent with their context. Putnam (1994, p. 101) urges researchers of *bona fide* groups to pay close attention to "what is covert, implicit, and assumed normal" in order to reveal the deep structures of the group or team. Frey (1994), Poole (1990, 1994), and other communication scholars have championed this approach to enrich the conceptualization of small group communication through exploration of groups in real-life contexts, rather than researcher-constructed, "zero-history" groups. The *bona fide* group approach is very useful for researching health care teams because of their complexity and embeddedness within the culture of the medical establishment. Lammers and Krikorian (1997) expanded upon Putnam and Stohl's (1990) original model of *bona fide* groups by articulating implicit aspects of the model via their study of surgical teams. They argued that studies of *bona fide* groups must involve attention to the group in its specific institutional context because a given team task or decision "is a manifestation of much individual, small group, organizational, and institutional work that goes on prior to and after [it]" (p. 36).

### III. Collaboration in Health Care

Some level of collaboration between health care providers is necessary in any health care setting. In hospitals, careful coordination of services between nurses, nursing assistants, physicians, and a variety of health care professionals (e.g., physical therapists) must occur around the clock. In outpatient settings health care providers may operate at varying levels of collaboration depending upon the types of services offered. No single discipline or specialty can meet all of a patient's needs. A hospitalized patient, for example, may need a physician to provide a diagnosis and treatment plan, a nurse to administer medications, a nursing assistant to help with bathing and toileting, a phlebotomist to take blood samples, a dietitian to monitor food intake, a physical therapist to aid in muscle strengthening and flexibility, and a social worker to coordinate home care following release. Without communication among all of these professionals, comprehensive and efficient treatment of the patient is not possible.

According to Baggs and Schmitt (1988), collaboration involves coordination of individual actions, cooperation in planning and working together, and sharing of goals, planning, problem-solving, decision-making, and responsibility. Collaboration can happen between two people who represent the same or different disciplines, or among small groups of people representing one or a range of disciplines. In general, health care providers tend to strongly identify with their own discipline and its language, values, and practices (Furnham, Pendleton, & Manicom, 1981; Kreps, 1988) and to relate best to members of their own discipline (Siegel, 1994). Collaboration may be very difficult to negotiate effectively because of differences in disciplinary socialization. Cross-disciplinary communication can be complex for a myriad of reasons, but it also can be professionally rewarding and beneficial to patients' (and patients' companions') experiences. Although different professions have some unique issues in collaboration,

Nurses, pharmacists, and social workers face comparable issues in collaborating with physicians, including a lack of acceptance by physicians of the full breadth of other professionals' roles, continuing status and gender differences, contradictory expectations regarding the autonomy of nonphysicians, and a commonly

expressed need for physicians' recognition of their competence . . . (Abramson & Mizrahi, 1996, p. 271)

Research on health care collaboration is very physician-centric, with most studies investigating how physicians work with members of other disciplines; it rarely specifies how nonphysicians from different disciplines communicate with members of other disciplines, or even physicians from different specialties (Atkinson, 1995). Still, a good deal of research has been conducted with the goal of improving communication between physicians and nurses, nurse practitioners, social workers, pharmacists, and, to a lesser extent, other physicians. In order to uncover some of the challenges associated with collaboration, I will begin with a brief review of findings on physicians and members of various disciplines.

#### *A. Nurse-Physician Collaboration*

Nurses and physicians generally do not share perceptions of their own and the others' roles in providing health care (Iles & Auluck, 1990; Katzman, 1989). Stein's (1967) classic rendering of the "doctor-nurse game" depicted dominating doctors to whom nurses made diagnostic and treatment recommendations in a submissive manner, such that the recommendation appeared to have been initiated by the physician. This pervasive pattern served to reinforce the existing hierarchy that framed nurses as "handmaidens" to physicians (Prescott & Bowen, 1985). The fact that nursing is overwhelmingly female (Haug, 1988) and medicine was almost exclusively a male province until the last 25 years reinforced this dynamic. The addition of more female physicians has not brought about rapid change in the nurse-physician relationship. For example, one study reported that 55% of nurses surveyed found working with female physicians to be no better or worse than working with male physicians (Nursing 91, 1991). This may be due to the fact that female physicians are trained largely by men, according to masculine communication norms (Northrup, 1994; Wear, 1997).

Over time, nursing roles have expanded, formalized, and come to be regarded as more autonomous in their areas of expertise. Many nurses assert their equality and work to improve collaborative communication

with other professionals, particularly with physicians (Stein, 1990). Physicians often perceive attempts at collaborative practice by nurses as an invasion of their rightful sphere of practice (Baggs & Schmitt, 1988; Michelson, 1988). Lacking clear boundaries, nurses and physicians must continually negotiate their roles (Allen, 1997; Prescott & Bowen, 1985). While roles are evolving, continuing power and economic status differences encourage nurses to accommodate and submit to physicians (Katzman, 1989; Prescott & Bowen, 1985).

Open and frequent communication is essential to improving nurse-physician relationships (Katzman, 1989; Pike, 1991; Prescott & Bowen, 1985). Quality of relationships between nurses and physicians appears to be critical in lowering mortality rates in hospital intensive care units (Knaus, Draper, Wagner, & Zimmerman, 1986) and overall improvement of patient care (Fagin, 1992). Collaboration between doctors and nurses is especially important in caring for elderly patients (Fagin, 1992).

### *B. Nurse Practitioner-Physician Collaboration*

The position of nurse practitioner is a relatively new one, and the negotiation of control between nurse practitioners and physicians is still very much unresolved. Physicians tend to see nurse practitioners as physicians' helpers or extenders who should operate beneath the authority of physicians (Campbell-Heider & Pollock, 1987). This encourages continuation of the doctor-nurse game which reinforces physician dominance, even though nurses at all levels hold significant informal power and influence over diagnosis and treatment decisions (Allen, 1997; Campbell-Heider & Pollock, 1987). Recent studies demonstrate that some nurse practitioners and physicians have collaborated successfully (and cost-effectively) in providing long-term care to patients (Burl, Bonner, Rao, & Khan, 1998; Ryan, 1999) and that such collaborations may improve efficiency of patient care in primary care practices (Arcangelo, Fitzgerald, Carroll, & Plumb, 1996).

### *C. Social Worker-Physician Collaboration*

Abramson and Mizrahi (1986) define collaboration between social workers and physicians as involving "joint activity based on equality, mutual respect and shared understanding of roles" (p. 1). Mizrahi and Abramson (1994) characterize physicians' and social workers' attitudes towards collaboration as existing along a continuum from traditional hierarchical interactions through transformational partnerships. At one end of the continuum, traditional physicians maintain

dominance in interactions, have little interest in psychosocial factors, and reluctantly accept social workers' function of obtaining specific services. Traditional social workers accept physician control and limit their interventions to those defined by physicians. Transitional physicians maintain an authoritative stance but appreciate social workers' handling of psychosocial issues and assistance in making discharge and placement decisions, while transitional social workers see themselves as consultants who offer resources and opinions to assist physicians in decision making. Finally, transformational physicians and social workers perceive themselves as interdependent colleagues and willingly share responsibility and decision making with each other. Since individual physicians and social workers may view their collaboration from any point on their continuum, interactions may be strained because of differing expectations for behavior (Mizrahi & Abramson, 1994).

Tension between social workers and physicians remains a common problem, and collaboration often is not successful (Abramson & Mizrahi, 1986, 1996; Hess, 1985; Schlesinger & Wolock, 1983). Abramson & Mizrahi (1996) found that physicians and social workers had different beliefs about critical components of collaboration, with physicians emphasizing competence of social workers and social workers emphasizing quality of interaction with physicians. Social workers are trained in a biopsychosocial model of care, whereas physicians are generally taught the biomedical model (Gilbar, 1996). Physicians have power and high status and therefore often do not feel the need for and are not motivated to work towards collaboration with social workers, who are motivated to increase their role in patient care and have a voice in decision making (Abramson & Mizrahi, 1986, 1996). Social workers can promote better relationships with physicians by emphasizing their ability to provide important services for physicians caring for patients (Abramson & Mizrahi, 1986). Social workers are particularly suited to cases in which there are psychosocial and cultural factors that affect delivery of medical care, emotionally difficult interactions such as delivering poor prognoses, and serving as an educator and liaison for patients' family members (Ben-Sira & Szyf, 1992). Physicians increasingly depend upon social workers as insurance companies and managed care associations require physicians to release patients from hospitals quickly; social workers arrange interim care such as rehabilitation hospitals or nursing home

placement, or facilitate in-home care (Mizrahi & Abramson, 1994).

#### *D. Pharmacist-Physician Collaboration*

The nature of the pharmacist-physician relationship makes some tension inevitable: "Actions that the pharmacists must routinely perform if they are to practice pharmaceutical care (e.g., correcting, advising, reminding, recommending, reporting) are intrinsically threatening to physicians' professional identities" (Lambert, 1996, p. 1190). Aware of this dynamic, pharmacists and pharmacy students tend to use politeness and face-saving strategies to present recommendations to physicians (e.g., asking leading questions rather than directly suggesting an alternative drug) (Lambert, 1995, 1996). Therapeutic interventions by pharmacists offering safer, more medically and/or more cost effective drug alternatives to physicians are generally well-accepted and are more common in teaching hospitals than community hospitals (Greco, Mann, & Graham, 1990). Pharmacists seek to expand their roles within health care organizations, and physicians generally view such expansion as an encroachment on their territory (Lambert, 1995, 1996; Ritchey & Raney, 1981). Some researchers have found benefits to increased pharmacist involvement in geriatric patient care. For example, pharmacist review of prescriptions for elderly patients improved quality of patient care in regards to appropriate medication use

by catching possible interactions, allergies, contraindications, and over-medication (Cooper, 1985; Monane, Matthias, Nagle, & Kelly, 1998).

#### *E. Physician-Physician Collaboration*

Communication between physicians is poorly researched; the overwhelming focus of research on physicians has been on their communication with patients (Atkinson, 1995). Interestingly, what research there is on communication between physicians often has focused on the negotiation of medical mistakes, collegial control, and other negatively perceived aspects of medical care (e.g., Bosk, 1979; Friedson, 1976; Millman, 1976; Pettinari, 1988). One area that has received significant attention is the culture of medicine and the socialization of medical students, interns, and residents into that culture by physicians (e.g., Atkinson, 1992; Hunter, 1991). Atkinson (1995) argues that "biomedical knowledge is socially produced and culturally specific . . . [and] dependent upon certain fundamental features of medical culture, which is itself produced and reproduced through processes of socialization" (p. 46). His study of hematologists' consultations with physicians of other specialties explicates the process of producing medical knowledge through communication among physicians. For Atkinson, physicians' talk is not the means to the accomplishment of medical work; the talk is the work.

## **IV. Health Care Teams**

More formally organized and regulated collaboration occurs in health care teams. Multidisciplinary and interdisciplinary teams continue to grow in popularity in virtually all aspects of health care, particularly in the field of geriatrics, where comprehensive assessment by a team is well established internationally as a necessary aspect of health care delivery (Rubenstein, Stuck, Siu, & Wieland, 1991). Collaboration between individual members of different health care disciplines has been increasingly formalized with the advent in the late 1970s of health care teams. Increased specialization contributes to the need for collaboration between experts in different areas of knowledge (Cooley, 1994;

Satin, 1994; Stahelski & Tsukuda, 1990). Health care teams have become prevalent in many aspects of health care delivery (Abramson & Mizrahi, 1996; Cooley, 1994; Lichtenstein, Alexander, Jinnett, & Ullman, 1997; Wieland, *et al.*, 1996). Teams exist in primary care (Hannay, 1980); developmental disability assessment (Sands, 1993), community mental health (Griffiths, 1998), long-term institutional care (Cott, 1998); rehabilitation (Cooley, 1994); oncology (Sullivan & Fisher, 1995), hospices (Berteotti & Seibold, 1994); and health care education (Edwards & Smith, 1998; Interdisciplinary Health Education Panel of the National League for Nursing, 1998).

Geriatrics is one of the areas in health care in which interdisciplinary collaboration on teams has become commonplace. Since the 1980s, health care researchers have drawn attention to the particular needs, preferences, and abilities of elderly patients. The elderly are the fastest growing segment of the U.S. population, with elderly women being the majority of this group (Allman, Ragan, Newsome, Scoufos, & Nussbaum, 1999). Older patients are likely to have fragmented care, seeing a different specialist for each chronic or acute condition and greatly increasing the need for coordination of care and treatment (Beisecker, 1996). Members of different disciplines working together is a cornerstone of geriatric care; older cancer patients are more likely to have more comorbidities and psychosocial needs than younger patients (Stahelski & Tsukuda, 1990).

Geriatric teams are a particular type of team designed to meet the needs of elderly patients. Geriatric evaluation teams are extremely effective at assessment and intervention (Applegate, Miller, Graney, *et al.*, 1990; McCormick, Inui, & Roter, 1996; Rubenstein, Josephson, & Wieland, *et al.*, 1984). The comprehensive geriatric assessment (CGA), defined as “a multidisciplinary diagnostic process intended to determine a frail elderly person’s medical, psychosocial, and functional capabilities and limitations in order to develop an overall plan for treatment and long-term follow-up” (Rubenstein, *et al.*, 1991, p. 8s), forms the cornerstone of interdisciplinary geriatric practice. Such assessment and coordination of treatment and services is especially important for older patients because this population of patients is more likely than others to have multiple health needs, as well as complex interactions of medical, psychosocial, and material circumstances (Satin, 1994; Siegel, 1994; Stahelski & Tsukuda, 1990). Geriatric evaluation with management (GEM) programs have become common for the treatment of frail, hospitalized elderly patients (Rubenstein, *et al.*, 1991). GEMs usually use an interdisciplinary team approach that involves a “core” team that sees every patient and an “extended team” of professionals who can be called in for consultation and treatment as needed (e.g., occupational therapy, psychiatry) (Rubenstein, *et al.*, 1991).

The composition, organization, and functioning of teams varies widely among institutions, medical specialties, and types of patient services offered. Health care teams may include a large number of loosely associated personnel or a smaller number of highly interdependent professionals and paraprofessionals. A

few examples of team personnel from published studies include physicians, pharmacists, registered nurses, advanced practice nurses, licensed practical nurses, occupational therapists, physical therapists, respiratory therapists, and social workers, radiology technicians, respiratory therapy technicians, as well as non-licensed personnel such as clerks (Jones, 1997); attending physician, expert nurse, clinical nurse IIIs, clinical nurse IIIs, clinical nurse residents, chief resident, junior resident, and medical student (McHugh *et al.*, 1996); attending physician, patient and family, consulting physician, ORL [Otorhinolaryngology—ear, nose, and throat] registered nurse, ORL nurse specialist, social/psychosocial worker, dietitian, speech pathologist, maxillofacial prosthodontist, research associate, and pharmacist (Sullivan & Fisher, 1995); or two oncologists, a nurse practitioner, two registered nurses, a registered dietitian, a clinical pharmacist, a licensed social worker, and an administrative assistant (Ellingson, forthcomingA). The team membership varies depending upon the type of illness for which the patient is being treated, the resources of the particular hospital or clinic, politics, and other factors. I now turn to an exploration of conceptualizations of teamwork.

### *A. Defining Health Care Teamwork*

Authors have put forth many definitions of teams in the health care, communication, and management literatures. Researchers of health care teams involving staff from multiple disciplines generally use the terms multidisciplinary, interdisciplinary, transdisciplinary, and pandisciplinary to designate the type and degree of collaboration among team members. I find it most useful to conceive of these terms not as distinct, opposing concepts, but as existing along a continuum from loose (or no) coordination, through interdependency, to boundary/role blurring and synergistic teamwork (Opie, 1997; Sands, 1993; Satin, 1994).

Representing an extreme not included in others’ conceptions of a continuum of teamwork, Satin (1994) describes two models of disciplinary relationships that are not defined as teamwork at all: unidisciplinary in which all tasks are carried out by members of different disciplines with no awareness or interest in the activities of other disciplines, and paradisciplinary, in which awareness and courtesy exist between members of disciplines, but no coordination of efforts or joint planning takes place. Most scholars conceptualize teamwork on a continuum beginning with multi-disciplinary collaboration at one end. Campbell and Cole (1987) define a

multidisciplinary team as a group of professionals working independently from each other and interacting formally. Jones (1997) expands this definition somewhat, viewing multidisciplinary collaboration as “a multimethod, channel type process of communication that can be verbal, written, two-way, or multiway involving health care providers, patients, and families in planning, problem solving, and coordinating for common patient goals” (p. 11). Members of multidisciplinary teams work toward common goals but function largely independently of one another, relying on formal channels of communication (e.g., memoranda, staff meetings) to keep other members informed of assessments and actions (Satin, 1994).

Moving along the continuum to a more interdependent form of team, Wieland, *et al.* (1996) define interdisciplinary teams as a “group of professionals [who] work interdependently in the same setting, interacting both formally and informally” (p. 656). Schmitt, *et al.* (1988) offer a list of criteria for interdisciplinary teams:

- (1) multiple health disciplines are involved in the care of the same patients, (2) the disciplines encompass a diversity of dissimilar knowledge and skills required by the patients, (3) the plan of care reflects an integrated set of goals shared by the providers of care, and (4) the team members share information and coordinate their services through a systematic communication process. . . [involving] the participation of the disciplines in regularly scheduled face-to-face meetings. (p. 753)

Interdisciplinary team members achieve a significant degree of coordination and integration of their services and assessments of patients. Some role shifting and evolution may occur over time (Satin, 1994).

In some cases, interdisciplinary teams evolve into transdisciplinary teams, in which “members have developed sufficient trust and mutual confidence to engage in teaching and learning across disciplinary boundaries” (Wieland *et al.*, 1996, p. 656; see also Opie, 1997; Sands, 1993). Disciplinary boundaries are very flexible in this model of teamwork, and staff comfortably share their “turf” with other team members as they work toward common goals. Stable membership on the team generally is a prerequisite to developing such a deep level of trust. Pike (1991) argues that, at their best, relationships between team members are synergistic, enabling high quality patient care and a high level of job satisfaction for providers.

Still further on the continuum, Satin (1994) proposes a “pandisciplinary” model in which geriatrics (or another specialty) could be seen as a distinct, unitary discipline, rather than as a subspecialization across several traditional health care disciplines. In this model, team members do not represent distinct disciplines (e.g., medicine or social work), but include members sharing a unique geriatrics perspective without loyalty to a traditional discipline’s values and practices. Tasks would be divided according to preference, ability, and workload rather than specialty, and training would be highly interdisciplinary.

Of all of the available models for teamwork, Satin (1994) argues for the strengths of the interdisciplinary team approach (a level of interdependency and boundary blurring that Wieland *et al.*, 1996 and Opie, 1997 refer to as transdisciplinary), which:

consciously recognizes and conscientiously implements the overlap in spheres of competence among the disciplines. . . ; entails the most intimate and flexible working relationship among disciplines. . . ; entails the most extensive knowledge of the preparation, expertise, and responsibilities of the other disciplines, respect for them, and an interest in sharing tasks and learning with them. . . ; assign[s tasks] not solely by discipline, but by competence determined also by characteristics of team members and the demands of the project at hand and its environment . . . ; participants are flexible about the assignment of clinical, teaching, and administrative roles . . . ; [and] competence and identity are not developed solely within the parent disciplines but are also influenced by professional experience, personal talents and interacts, and, most significantly, by contact with other disciplines. (pp. 399-400)

Siegel (1994) concurs with Satin’s assessment, arguing that, “Only in the interdisciplinary model . . . is there an overlapping of roles that leads to the ideal forms of teamwork, including interdependence, reciprocity of influence, and the hoped-for synergy among team members” (p. 406). Optimum functioning of teams is difficult to achieve. Negotiation of overlapping roles and tasks is sometimes difficult because of territorial behavior by members of different disciplines, and successful negotiation (and renegotiation over time) is considered a hallmark of a well functioning interdisciplinary team (Germain, 1984; Sands, 1993).

Many authors use the terms “interdisciplinary,” “multidisciplinary,” or “collaborative” teams without

defining the terms, and/or use the terms interchangeably (Satin, 1994). As demonstrated above, Satin and Siegel use interdisciplinary where Opie and Wieland would use transdisciplinary. Lack of clarity in terms may make it more difficult to make valid comparisons across studies of teams.

### *B. Effectiveness of Health Care Teams*

By far, the majority of studies of health care teams have been devoted to establishing a correlation between the use of a team approach to care and measurable patient outcomes. Interdisciplinary teams improve overall care for patients (Cooke, 1997; Cooley, 1994; Fagin, 1992; McHugh, West, Assatly, Duprat, *et al.*, 1996; Pike, 1991; Wieland, Kramer, Waite, & Rubenstein, 1996), and promote job satisfaction for team members (Abramson & Mizrahi, 1996; Gage, 1998; McHugh, *et al.*, 1996; Pike, 1991; Resnick, 1997; Siegel, 1994). Multidisciplinary teams facilitate and improve training of students in medicine, nursing, and allied health fields, as well as enabling veteran staff to learn from each other (Abramson & Mizrahi, 1996; Edwards & Smith, 1998; Interdisciplinary Health Education Panel of the National League for Nursing, 1998).

Specifically, multidisciplinary and interdisciplinary team care in a wide variety of clinical settings has been associated with the following outcomes: decrease in length of hospital stay (Barker, Williams, Zimmer, Van Buren, *et al.*, 1985; Wieland, Kramer, Waite, & Rubenstein, 1996); nurse perceptions of good quality patient care (Trella, 1993); increased patient satisfaction (Trella, 1993); better coordination of patient care (McHugh, *et al.*, 1996); increased use of hospital rehabilitation services (Schmitt, Farrell, & Heinemann, 1988); improved functioning in "Activities of Daily Living" (Rubenstein, Abrass, & Kane, 1981; Rubenstein, Josephson, Wieland, English, *et al.*, 1984); improved pain control (Trella, 1993); decreased emergency room usage (Rubenstein, Josephson, Wieland, English, *et al.*, 1984); fewer nursing home admissions following hospitalization (Wieland, *et al.*, 1996; Zimmer, Groth-Junker, & McClusker, 1985); decreased mortality one year after discharge (Langhorne, Williams, Gilchrist, & Howie, 1993; Rubenstein, *et al.*, 1991; Wieland, *et al.*, 1996); decreased prescribing of psychotropic drugs among nursing home residents (Schmidt, Claesson, Westerholm, Nilsson, & Svarstad, 1998); and decreased overall health care costs (Williams, Williams, Zimmer, Hall, & Podgorski, 1987).

Institutional context heavily influences team effectiveness (Opie, 1997; Siegel, 1994). Because hospitals are concerned with insurance reimbursement, administrators pressure teams to define services with a great deal of specificity. The essential care giving function of many staff members is difficult to define and hence impossible to be paid for (Estes, 1981). Opie (1997; see also Clark, 1994; McClelland & Sands, 1993; Saltz, 1992) synthesizes the problems of teamwork as follows:

inadequate, or an absence of, organisational support; the absence of training in team work; the absence of orientation programmes for new members joining the team; lack of interprofessional trust resulting in complicated power relations between professionals; an overabundance or, alternatively, an absence of conflict; lack of clear structures and directions; unclear goals; the dominance of particular discourses resulting in the exclusion of others; the existence of tensions between professional discourses resulting in potentially unsafe practices; lack of continuity of members; difficulty of definition of key terms; the production of client discussions which, far from addressing client goals, marginalise them and contribute to clients' disempowerment; and an absence of teams' examination of their processes. (p. 262)

All these contextual factors constrain team effectiveness.

### *C. Communication and Conflict in Teams*

Team meetings are a critical aspect of health care team functioning, and effective communication between all members is needed, but often lacking (Cooley, 1994; Gage, 1998). Effective communication among team members is crucial to successful collaboration on patient care (Abramson & Mizrahi, 1996; Fagin, 1992). Teams often have a diverse membership. For decision-making tasks, diversity in group or team membership—both inherent (age, ethnicity, gender, etc.) and role-related (occupation, status)—increases the number of solutions offered and alternatives considered in meetings (Maznevski, 1994). However, diversity presents great obstacles to smooth interaction processes, more often than not resulting in decreased performance (Adler, 1991), unless the group is able to integrate the diversity of its members through effective communication (Maznevski, 1994). Professional training for health care personnel must focus on interpersonal, interactional skills to improve interactions (Abramson & Mizrahi, 1996; Cooley, 1994).

Some amount of conflict in teams with members from different professions inevitably arises (Cooke, 1997). Conflicts between professionals can undermine the collaborative efforts of the team (Abramson & Mizrahi, 1996; Sands, Stafford, & McClelland, 1990). Each member of the team must sacrifice some degree of autonomy in order for the group to function; at times, role confusion, overlapping responsibilities, and other disciplinary factors can get in the way of collaboration (Berteotti & Seibold, 1994; Campbell-Heider & Pollack, 1987; Hannay, 1980; Kulys & Davis, 1987). Often team members perceive problems with goal and role conflicts as personality conflicts or interpersonal communication problems (Siegel, 1994). Problems with roles can include role conflict, role overload, or role ambiguity (Schofield & Amodeo, 1999). Size of the team is also a factor; Stahelski and Tsukuda (1990) found that increasing group size decreased prosocial behavior by individuals. The complexity of tasks faced by interdisciplinary teams may make large group size especially difficult.

Physicians and social workers cited respect for other staff members, similar perceptions, and the quality of communication as the top three factors crucial for collaboration between members of their professions (Abramson & Mizrahi, 1996). "The ideology of teamwork functions to promote cooperation and collaboration and prevent lack of cooperation that could occur among disparate professionals" (Cott, 1998, p. 869). Pike (1991) adds that professionals must trust and respect others and the work and perspectives they contribute, as well as develop a sense of caring about the other and about the relationship. Effective collaboration leads to a synergy that improves patient care.

Synergy allows the alliance to be more than the sum of its membership. It accounts for the blending, not just mixing, of perspectives. It is not only the sharing of ideas, but also the advancement of thought through communal experience and reflection. The dynamics of interpersonal interactions in collaboration are mutually empowering rather than merely congenial. (Pike, 1991, p. 359)

Teams do not tend to be egalitarian in their collaboration. Physician dominance continues to be the rule in

interdisciplinary work (Berteotti & Seibold, 1994). The ideology of teamwork is often not accompanied with egalitarian modes of decision making (Schofield & Amodeo, 1999). Lower ranked team members often use strategies such as humor to resist or attenuate instructions coming from more powerful professionals on the team, without direct confrontation (Griffiths, 1998).

#### *D. Role Overlap on Teams*

Overlap of professional roles often proves a challenge in health care professional collaboration across disciplines. The domains of expertise often overlap on interdisciplinary teams and team members tend to view role overlap as problematic and a source of conflict (Kulys & Davis, 1987; Sands, 1993). A balance must be negotiated between the need for collaboration to meet team goals and the need for discrete disciplines to maintain their boundaries; "territorial issues are played out in the way in which the team addresses overlapping roles and implicit rules" (Sands, 1993, p. 546). Sands found a variety of reactions to overlapping roles. Some team members found the redundancy a way of double-checking, inevitable and unproblematic, while others stressed the importance of not repeating too much with the client nor surrendering the position of one's discipline. Furnham, *et al.* (1981) argue that overlapping functions caused feelings of competition and led professionals such as social workers, occupational therapists, nurses, and physicians to rate members of competing professions negatively, while rating their own group very highly (see also Jones, 1997). In a similar study, Koeske, Koeske, and Mallinger (1993) compared in-group and out-group evaluations of psychologists, psychiatrists, and social workers and concluded that each group rated its own members as more helpful, warm, and expert than members of the other two groups. A constructivist approach to understanding teams suggests that teams re/negotiate meaning as they interact through formal and informal means, in the process establishing norms for their group culture and expectations for behavior by group members in each role (McClelland & Sands, 1993; Sands, 1993). Thus the disciplinary boundaries are drawn and redrawn, and the division of clinical tasks is renegotiated over time.

## V. Perspective and Suggestions for Future Research

A significant body of valuable research now exists on health care professionals' communication, collaboration, and teamwork. However, there are several important aspects of collaborative communication that remain under-investigated, and I posit that attention to three particular areas would be fruitful. From my perspective, research in this field remains overly focused on generating quantitative studies that seek to establish correlations between team intervention and various measurable patient, organizational, and fiscal outcomes; too little attention is paid to describing the actual communicative processes of collaboration and teamwork. Moreover, there is undue focus on team meetings as the singular site of teamwork. Finally, there has been a highly problematic lack of scrutiny of the relationships among collaboration, teamwork, and the hierarchical culture of Western medicine. I will discuss each of these areas of opportunity in turn.

### A. *Teams in Action*

First, despite significant evidence of positive effects of teams on patient outcomes and employee satisfaction, we know relatively little about how health care teams actually communicate in daily clinical practice (Opie, 1997, 2000). Critics argue that much of the research on teams is "anecdotal, exhortatory and prescriptive. . . there is an absence of research describing and analyzing teams in action," (Opie, 1997, p. 260; see also Mizrahi & Abramson, 1994; Sands, 1993; Sheppard, 1992). Some critics of team research point out that despite correlations between use of teams and favorable patient outcomes, the effectiveness of teams is often in doubt. Cott (1998) argues that

most literature on health care teams subscribes to three basic assumptions: (1) that team members have a shared understanding of roles, norms, and values within the team; (2) that the team functions in an egalitarian, cooperative, interdependent manner; and (3) that the combined efforts of shared, cooperative decision-making are of greater benefit to the patient than the individual effects of the disciplines on their own. (p. 851)

In many cases, the first two assumptions are not supported by research, and the third is unlikely to come

true without the others in place. Such assumptions get in the way of understanding what actually happens in daily practice.

Describing teamwork processes is a necessary step towards determining which of those processes are responsible for favorable outcomes and then developing strategies to improve those processes. Qualitative research that looks at communication and the meanings constructed in communication is crucial to improving medical practice and to bringing more voices into the medical world (Miller & Crabtree, 2000). A broader range of methodology allows for a more complex and thorough understanding of the meanings of health care. Putnam and Stohl (1990, p. 260) called for research to "improve the ecological validity of our findings" by paying attention to the meaning of group processes within their specific contexts, a task for which ethnographic methods are well suited (Dollar & Merrigan, 2002). There have been a number of excellent studies of collaboration and/or teams that have used an ethnographic approach to studying health care providers (McClelland & Sands, 1993). Examples of ethnographic projects include an ethnography and sociolinguistic study of an outpatient evaluation center that provides comprehensive assessments of children with possible mental retardation/developmental disability (McClelland & Sands, 1993; Sands, 1993); ethnographies of nurse-physician collaboration on hospital wards (Allen, 1997; Hughes, 1988; Porter, 1991, 1995; Stein, Watts, & Howell, 1990); an ethnography of an emergency department (Roth & Douglas, 1983); an ethnography of teams that provide long-term care coordination and services for individuals with physical and psychiatric disabilities (Opie, 2000); and my own ethnography of a geriatric oncology team (Ellingson, 2001). More ethnographies and other qualitative studies are needed that take a communication perspective on collaboration and teamwork.

Also needed are studies that describe health care professional teamwork and collaboration from the patients' perspective. Vanderford, Jenks, and Sharf (1997) and Bennet and Irwin (1997) propose that research has focused on a biomedical model that places the physician as primary, and suggest making

patients and their needs, perceptions, and meanings the central focus of research; they suggest exploring “patient-centered” health communication research which focuses on patients’ needs, desires, and perceptions. Teams exist in order to provide patient care, and yet patients are seldom asked for their view of teams’ effectiveness (Opie, 1998). A patient-centered approach would not define effectiveness according to the organizational and professional objectives of the team and its health care organization, but according to patients’ perceptions of care, efficiency, inclusion, etc. Quantitative patient satisfaction surveys would provide one approach; however, I would once again suggest that qualitative methods would yield richer accounts of patients’ experiences.

### *B. Informal Backstage Communication*

A second major area for further research in collaboration and teamwork concerns interactions among team members outside of formal team meetings. Multidisciplinary and interdisciplinary teams typically meet once a week to exchange information and to negotiate treatment plans. These meetings are crucial to team functioning; however, I believe that the one or two hours spent per week in team meetings does not come close to capturing the complexity of collaboration and teamwork in actual teams. The ethnographic study I conducted (Ellingson, 1998, forthcomingB) demonstrates that clinic backstage areas such as break rooms, hallways, clinic computer desk and work tables, photocopy rooms, and offices, not just team meetings, must be recognized as a site of teamwork. Using the metaphor of performance, Goffman (1959) defines the backstage region as

a place, relative to a given performance, where the impression fostered by the performance is knowingly contradicted as a matter of course... It is here that the capacity of a performance to express something beyond itself may be painstakingly fabricated; . . . illusion and impressions are openly constructed. Here stage props and items of personal front can be stored in a kind of compact collapsing of whole repertoires of actions and characters. (p.112)

Informal backstage communication on health care teams has not been examined closely or theorized as have team meetings. I found little acknowledgment of clinical interaction between team members in articles written about teamwork. Yet, this is an area in which possibilities for truly interdisciplinary work are real-

ized. Authors such as Opie (1997), Sands (1993), and Siegel (1994) call for boundary blurring, role flexibility, and dynamic teamwork; if the rigid divisions of the health care hierarchy are ever to be renegotiated (that is, languaged differently), the backstage would be a good place to start. The dynamism of the setting forms a context in which disciplinary boundaries can waffle and micro-negotiations can take place, probably more easily than in a highly structured meeting. The potential for successful collaboration in the backstage is due in part to interdependence. Goffman (1959) argues that mutual dependence helps to create cohesion on a team and diminish status and rank differences as they pursue a common definition of the performance. Team members have both independent tasks to carry out and a responsibility to share information, formally and informally, in pairs and small groups; this means that members have their own “territories,” as well as a commitment to sharing information and resources. The dialectic of independence and mutual dependence may provide an equitable ground for collaboration that enables focus on problem solving and opportunity finding, rather than on status and disciplinary boundaries, at least to some extent.

However, backstage research is often hard to do; it is time consuming and, for lack of a better word, messy. In my case, I followed team members around and hurriedly scratched notes on everything they said to one another as they went about their work. Encounters between team members were often fleeting and conducted simultaneously with other tasks such as writing in charts or accessing records on a computer. These were not neat, bounded interactions in a quiet meeting room that could be easily recorded. Atkinson (1995) argues that medical anthropologists, medical sociologists, and health communication researchers have a predisposition for studying bounded communication events that has significantly biased our understanding of medical work. The vast majority of research and theorizing of the medical practice has focused on physician-patient interaction (the frontstage of medical care) (Atkinson, 1995). While this work is valuable, the predominance of this focus has led to certain limiting tendencies in research. One is the relative lack of problematizing of discourse among health care practitioners that occurs away from patients. Second is a largely unreflected upon preference for bounded communication episodes that has skewed the understanding of medical discourse. Atkinson (1995) explains that the physician-patient

interaction is generally very brief, takes place in a single, private location, and is easily recorded and transcribed. Such “manageable episodes” influence scholars to think of medical interactions as spatially and temporally bound:

the one-to-one medical consultation is a kind of synecdoche; that is, it stands in a part-for-whole relationship with the whole field of medical work. . . . Rather than diffuse and protracted, the cognitive and linguistic tasks of medicine are all too easily summarized as if they were virtually simultaneous events. (Atkinson, 1995, p. 35)

Empirical work on health care teams clearly reflects this preference for bounded, convenient chunks of communication in its focus on formal meetings. For example, Opie’s (2000) otherwise excellent study of health care teams in New Zealand centered on team meetings and excluded “joint work” between team members that occurred outside of meetings, positing that such work was only relevant to teamwork to the degree to which it subsequently was discussed within team meetings. The richness of my data belies this assertion; in the geriatric oncology team I studied, far more collaboration occurred outside of meetings than within them (Ellingson, forthcomingB).

Researchers’ focus on meetings as the site of teamwork also reflects a privileging of formal, public (traditionally masculine) discourse over informal, more private (traditionally feminine) forms of discourse (Campbell, 1989; Meyers & Brashers, 1994). Meetings have agendas, leaders, systems of turn-taking, and other norms associated with public communication, fitting “naturally” within researchers’ existing schemas for “teamwork.” Such beliefs and preconceptions reflect a white, middle-class, male bias in communication research (Meyers & Brashers, 1994; Wyatt, 1993). Moreover, studies of meetings have traditionally focused on decision-making as the crucial task of groups (Barge & Keyton, 1994; Propp & Kreps, 1994). Topics such as cooperation, socialization, connection, and relationships have been marginalized, socially constructing current conceptualizations of how communication operates in small groups (and teams) that are “inherently gender-laden” (Meyers & Brashers, 1994). That is, the focus on certain issues to the relative exclusion of others has led to an understanding of teams that is biased towards the perspectives of men and insufficiently accounts for the perspectives women have on communication in small groups. To truly understand teamwork and collabora-

tion, it is necessary to recognize the assumptions that we make as researchers about what “counts” and what is worthy of attention. Over-emphasis on formal, bounded interactions has skewed our understanding of teamwork and collaboration.

### *C. Power and the Culture of Medicine*

Researcher emphasis on formal communication to the neglect of informal communication is not the only way in which research on health care teamwork and collaboration has failed to consider how underlying assumptions about gender, race, power, and privilege affect communication in health care settings. Negotiation of communication among health care professionals is highly constrained by the context in which it occurs: teams “are embedded within an organization’s history, culture, and structure” (Barge & Keyton, 1994). Communication among team members is impacted by power, hierarchy, and privilege within the medical system in general and the specific hospital or other health care institution in particular. Despite recent important trends in health care structure, traditional gender, racial, and socioeconomic class hierarchies mirror the persistent professional hierarchies: physicians remain firmly ensconced as team leaders, with the majority of the high ranking physicians being white men and the vast majority of lower status professionals (e.g., nurses and social workers) being women (including women of color) (Cowen, 1992; Fagin, 1992; Wear, 1997).

Many people in the U. S. find it difficult to believe that institutionalized, structural inequalities continue to plague the medical system, particularly given the implementation of affirmative action programs in medical school admissions and hospital hiring policies (e.g. Pressman, 1991). There are many reasons for these persistent demographic trends and isolating specific causes and effects of such trends is difficult (Bickel, Galbraith, & Quinnie, 1995). Nonetheless, it is vitally necessary, in my opinion, that scholars acknowledge the systemic inequality of the medical system as part of the context in which the communication we study takes place. This in no way means that we should seek to place blame on particular groups of people; assigning blame is not productive. However, seeking to understand how daily communication is affected by power and inequality is productive.

The perpetuation of masculine privilege, power, and bias in the medical establishment is due at least in part to the overwhelming majority of administrative positions in hospitals and medical schools remaining

the exclusive purview of white men. For example, despite the fact that women make up fully half of all in-coming medical students, only four of the 127 medical schools in the United States are headed by a woman dean; the number of woman full professors averages 16 per medical school, compared to 155 men per school; very few department chairs in medical schools are women (Wear, 1997); and the American Medical Association has had only one female executive officer in its 144 year history, elected in 1998 (du Pre, 1999). Furthermore, the medical academy is overwhelmingly white and upper middle class in background and the higher levels of medical administration are made up primarily of people of European descent (Wear, 1997). Women of color are over-represented among the lowest paid health care workers, who primarily do direct, hands-on care (Sacks, 1988). The perspectives of lower-paid workers remain marginalized within health care organizations (du Pre, 1999).

Liberal feminists in the 1980s hoped in the critical mass approach to equality; that is, once enough women and people of color were physicians, the medical system would become less patriarchal in its values and communication styles. That has not been the case. Since those in power are responsible for training the next generation of physicians, traditional values and norms are passed on through language with minimal changes, regardless of the demographic make up of the incoming class of medical students (Beck, 2001). Those changes that are made occur well within the context (language) of the existing systems of power. Nor is the solution simply a matter of somehow getting women and people of color into high ranking offices since people rarely abandon models of "power-over" (Starhawk, 1989) once they attain the highest levels of power. The characteristics of specific individuals in power are only symptoms of the real problem; there is an entrenched set of values, beliefs, and practices that are harmful, regardless of who espouses them. Feminists and critical race scholars have pointed out how damaging the current system of health care is, particularly to people of color, the poor, and women, (e.g., du Pre, 1999). Patients are not the only ones harmed, however. U.S. society expects and tolerates nothing less than absolute perfection from the physicians it has elevated to God-like status; consequently, physicians have a high rate of suicide and substance abuse, and are very likely to suffer from other stress-related illnesses such as heart disease, head aches, and depression (du Pre, 1999).

Given the persistent stratification in medical institutions, communication within a team is likely to be, at least in part, a function of its members' relative power within the medical hierarchy, and hence, their gender and cultural backgrounds. The power disparity can cause a great deal of resentment and impede successful collaboration efforts (Abramson & Mizrahi, 1996; Fagin, 1992; Iles & Auluck, 1990; Lichtenstein, *et al.*, 1997). Perceptions of teamwork effectiveness vary significantly between the highly prestigious, highly paid positions of physician and administrator, and the relatively low ranking positions of some team members, such as nurses and other direct care givers (Berteotti & Seibold, 1994; Cott, 1998; Griffiths, 1998). Team members who are not integral to team decision making may feel alienated and are unlikely to identify strongly with the team as part of their professional identity to the extent that core professionals in positions of power within the team will (Cott, 1998). Thus, I argue, the effectiveness of teams may be tempered through its privileging some members over others. It is important that scholars explicate the relationships among structural inequalities, team organization, and daily interaction among team members.

The medical system can be changed. The current medical system is neither natural nor neutral; it is the result of specific historical events (Ehrenreich & English, 1973; Foucault, 1973/1994). The public has a tendency to believe that "it has always been this way," when in reality, the current system of medicine in the U.S. is a purely modern phenomenon that developed over the last century. The medical context in which teams operate is not an objective factor existing outside of groups; it is enacted through language in team members' day-to-day communication with each other (Barge & Keyton, 1994). Change is possible, but change necessitates examining our assumptions about power and privilege, and this is something that little research on health care teams has done. Connections need to be made between specific communication, collaboration, and teamwork processes and the values of the medical establishment (Ellingson, 2001; Wear, 1997). The issue is not only quality of care according to existing standards, but the possibilities of care under other models. To begin to envision systemic change requires that scholars, health care practitioners, and patients recognize the parameters of the system in which they are embedded.

In conclusion, the intersection of these three aspects of teamwork and collaboration—describing

the actual communicative processes of collaboration and teamwork rather than only establishing correlations, broadening the focus from team meetings as the singular site of teamwork to include other backstage regions, and conscious interrogation of the relationships among collaboration, teamwork and the hierarchical culture of Western medicine—provides fruitful topics for research. In an age of managed care, well-documented inequities in the delivery of health care

services, and a dramatic rise in the number of people living long lives with disabilities and chronic illnesses that require long-term care management, interdisciplinary collaboration and health care teams are critical to health care delivery systems. Careful study of how teamwork and collaboration are accomplished through communication is vital both to understanding teams and to helping teams to develop more effective ways of working together.

## Afterword

W. E. Biernatzki, S.J.

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Though the relevance of communication among health professionals may, at first sight, not seem too pertinent to the interests of many of *Trends'* readers, who are more likely to be focused on religious communication, communication ethics, media education, and so forth, Professor Ellingson makes a strong case for its importance to all people, both in terms of people's encounters with the health care industry and as a case study representing communication problems in all professional settings.

Communication researchers have long studied health communication: Its practitioners, for example, form one of the divisions of the International Communication Association and have published annual reports of their work from the mid-1970s (see Ruben, 1977, 1978; Nimmo, 1979, 1980). For those interested in earlier studies and perspectives, Krepes & Thornton provide an extensive bibliography of studies from 1963 on (1992, pp. 205-222).

Today health-related news comprises a large, perhaps growing, segment of the "news hole" of all contemporary mass media. Other factors that add to the topic's significance are the very high rates of medical accidents, accounting for around 100,000 deaths in hospitals each year in the United States alone (Leape, 2000), and the complexity of factors that enter into reporting on medical topics that make it a difficult area for journalists. How many of the hospital accidents are due to poor communication among medical professionals? How can journalists whose usual "beats" may be elsewhere prepare themselves in a practical way to report intelligently and meaningfully on health issues?

Such questions make the topic relevant for both the communication scholar and the practical communicator.

Many of the causes of tensions and deficiencies in communication among healthcare workers undoubtedly are due to their personalities or to social or cultural factors impinging from outside the medical institution. Such factors are extrinsic to the healthcare institution, and finding a general "cure" for them is a much more demanding task than hospitals, schools, or other institutions can hope to accomplish on their own as long as the culture of the broader society continues to be plagued by them. Among those factors that have been noted especially above are racism, manifestations of sexism, socio-economic class differences, and structures of power. Although an institution can carry out programs to raise the consciousness of its workers—administrators, physicians, nurses, pharmacists, technicians, social workers, nurses' aides, etc.—concerning such issues, it can do little to affect the broader culture that is the source of the problems. Here, however, the experience of health communication can inform the broader society of the seriousness of the issues that inhibit communication in every professional setting.

On the other hand, problems arising from images of role and professional identities are more intrinsic to the healthcare institution itself, and therefore more open to corrective action by the institution. One of the areas of conflict that seems to be among the most critical is the relationship between nurses and physicians. Recent decades have seen changes in the nursing profession, in particular, that influence that relationship. For example, the rise of professional nurse-practitioner-

ers, licensed to perform some functions previously reserved to physicians, may create ambiguities about role interpretations on the part of both nurses and doctors. Some doctors may feel threatened that their own hard-earned expertise, and consequently their status, is being downgraded. Others may simply have an inadequate understanding of the professional preparation of nurse-practitioners and other nurses and may be unwilling to give them the degree of respect for which their training has prepared them. Other specialists may experience conflicts arising from similar causes.

It therefore is incumbent on healthcare institutions to conduct continuing programs designed to give specialists in each field a more adequate understanding of the professional preparation undergone by those with differing specializations. Professional schools, too, need to offer training in human relations that will give physicians and others the interpersonal communication skills they need not only to shape an appropriate "bedside manner" with their patients but also a "role-side manner" that will promote smoother interaction with other professionals. Communication researchers have a vital role to play in this regard.

Health care is both a science and an art. The artistic dimension can easily be neglected, especially the vitally important art of mutually respectful human interaction. Without that art, the technical and scientific side of good healthcare practice can easily be undermined, as well.

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## Book Reviews

**Allen, Mike, Raymond W. Preiss, Barbara Mae Gayle, and Nancy Burrell.** (Eds.). *Interpersonal Communication Research: Advances Through Meta-Analysis*. Mahwah, NJ: Lawrence Erlbaum Associates, 2002. Pp. xvii, 480. ISBN 0-8058-3131-2 (hb.) \$99.00. ISBN 0-8058-3132-0 (pb.) \$45.00.

Meta-analysis, "a technique that allows researchers to aggregate data and summarize existing reports" (p. 3) acts as a corrective to traditional social science research based on statistical inference. Due to limits imposed by sample size and research design, a likelihood of error creeps into most studies; by combining studies through meta-analytic techniques, researchers can not only locate and correct errors but also propose new theoretical models. The reports in this volume apply a number of meta-analytic approaches to interpersonal communication research.

In defining the approach, Mike Allen and Raymond Preiss describe in general terms the steps taken in a meta-analysis:

A brief summary of the process for most meta-analyses is found in the following five steps: (a) defining the issue, (b) collecting the available literature, (c) converting and correcting statistical information, (d) averaging the available data, and (e) considering the variation in the observed effect. (p. 7)

The last step gives the analyst a tool to measure the possibility of error and can provide a basis for evaluating the findings and concepts used in studies based on statistical inference.

Charles R. Berger points out that meta-analysis has obvious applications in an area like interpersonal communication that generates thousands of individual studies. Not only can this analysis help in "the design and implementation of research-based practical interventions" (such as treatments of communication disorders); it can also help develop theory by providing "evidence for the robustness of . . . regularities and the variables that might moderate them" (p. 14). Berger himself proposes a general prototype of theory based on what we know of interpersonal communication as a way of sketching out directions for research. It is this context for meta-analysis that makes its techniques so important to communication researchers.

Based on a review of published studies, the edi-

tors divide interpersonal communication research into four broad categories. For each category, they offer a general introduction that defines the terms and approaches, and then they arrange a number of meta-analyses that explicate the area.

The first category consists of "individual issues in interpersonal communication." Three studies appear here: "Sex Differences in Self-Esteem: A Meta-Analytic Assessment" (Erin Sahlstein and Mike Allen); "Comparing the Production of Power in Language on the Basis of Gender" (Lindsay M. Timmerman); and "Social Skills and Communication" (Brian H. Spitzberg and James Price Dillard). Each of the individual studies follows the general pattern outlined by Allen and Preiss above. Such an overview can lead to interesting results, as when Sahlstein and Allen note how self-esteem's correlation with gender appears to change over time.

The second category moves from individual issues to dyadic ones. The section begins with "An Overview of Dyadic Processes in Interpersonal Communication" by two of the editors, Barbara Mae Gayle and Raymond W. Preiss. Individual studies in this section include "Sexual Orientation of the Parent: The Impact on the Child" (Mike Allen and Nancy Burrell); "Similarity and Attraction" (Kimo Ah Yun); "Self-Disclosure Research: Knowledge Through Meta-Analysis" (Kathryn Dindia); and "The Effects of Situation on the Use or Suppression of Possible Compliance-Gaining Appeals" (Dale Hample and Judith M. Dallinger).

The third category turns to communication processes: "Interactional Issues in Interpersonal Communication," with Gayle and Preiss again providing the introduction. This, the longest section of the book, includes studies of comfort, support, negotiation, argument, conflict, and coercion. The studies are "A Synthesis and Extension of Constructivist Comforting Research" (Mike Allen); "Divorce: How Spouses Seek Social Support" (Nancy A. Burrell); "Couples Negotiating Safer Sex Behaviors: A Meta-Analysis of the Impact of Conversation and Gender" (Mike Allen, Tara M. Emmers-Sommer, and Tara L. Crowell); "Argumentativeness and Its Effect on Verbal Aggressiveness: A Meta-Analytic Review" (Mark A. Hamilton and Paul J. Mineo); "Sexual Coercion and Resistance" (Tara M. Emmers-Sommer); and "A Meta-Analytic Interpretation of Intimate and Nonintimate Interpersonal Conflict" (Barbara Mae Gayle, Raymond W. Preiss, and Mike Allen).

The final section of the book turns to the application of meta-analysis to theory generation. It begins with an examination of the accuracy of representation of communication processes in interpersonal communication textbooks by Allen and Preiss. The section also includes "How Does Meta-Analysis Represent Our Knowledge of Interpersonal Communication?" (Daniel J. Canary and Michelle J. Mattrey); "Better Living Through Science: Reflections on the Future of Interpersonal Communication (Mary Anne Fitzpatrick)—a reflection on how interpersonal communication study has changed first in its focus from communication events to core strategic and nonstrategic communication processes and second in its analytic tools—and "The State of the Art of Interpersonal Communication Research: Are We Addressing Socially Significant Issues?" (Michael E. Roloff).

This volume provides a sweeping overview of interpersonal communication study and methods as well as an introduction to the use of a fairly sophisticated set of statistical tools.

The book has both author and subject indices.

—Paul A. Soukup, S.J.

**Bryant, Jennings, & Zillmann, Dolf** (Eds.). *Media Effects: Advances in Theory and Research*, second edition. Mahwah, NJ: Lawrence Erlbaum Associates. 2002. Pp. x, 634. ISBN 0-8058-3863-5 (hb) \$124.95; 0-8058-3864-3 (pb.) \$55.00.

This revised edition of *Media Effects* both updates and expands its predecessor. The original 16 chapters have added material to bring their summary treatments up to date. The editors have also added six new chapters "on important topics that have received new or renewed attention of late from the media effects community of scholars: media consumption and its underlying reception processes, intermedia processes, educational and prosocial effects, individual differences in media effects, news effects on issue perception, and third-person effects" (p. x).

The book itself seeks to fulfill several functions: a reference book on media effects, a classroom text, and a scholarly volume. Each essay, therefore, provides a survey of relevant research, an explanation of theoretical perspectives, an analysis of the work, and an extensive bibliography.

The 22 chapters include Maxwell McCombs and Amy Reynolds, "News Influence on our Pictures of the World," writing on research into the ability of the news

media to set the public agenda; and Dolf Zillmann, "Exemplification Theory of Media Influence," presenting an overview of research into the "representation of event populations by media exemplifications" (p. 24). George Gerbner, Larry Gross, Michael Morgan, Nancy Signorielli, and James Shanahan provide a discussion of cultivation analysis, its methods, and its findings in "Growing Up with Television: Cultivation Processes."

L. J. Shrum's chapter, "Media Consumption and Perceptions of Social Reality: Effects and Underlying Processes," examines what effect media use has on social cognition and the psychological mechanisms that might account for it. Priming—"the effect of some preceding stimulus or event on how we react, broadly defined, to some subsequent stimulus" (p. 97)—is one possible path of media influence. David R. Roskos-Ewoldsen, Beverly Roskos-Ewoldsen, and Francesca R. Dillman Carpentier explain the theory and relevant research in "Media Priming: A Synthesis." In Chapter 6, "Social Cognitive Theory of Mass Communication," Albert Bandura recaps his groundbreaking work on social learning and the media's role in it.

Another theoretical model for the persuasive power of the mass media lies in the elaboration likelihood theory. Richard E. Petty, Joseph R. Priester, and Pablo Briñol summarize both the model and its supporting research in "Mass Media Attitude Change: Implications of the Elaboration Likelihood Model of Persuasion." Everett M. Rogers explores a compound process, "when the mass media stimulate interpersonal communication about a topic" (p. 199) in "Intermedia Processes and Powerful Media Effects."

A number of chapters examine media effects in particular contexts. Douglas M. McLeod, Gerald M. Kosicki, and Jack M. McLeod turn to politics in "Resurveying the Boundaries of Political Communications Effects." Glenn G. Sparks and Cheri W. Sparks look again at violence studies in "Effects of Media Violence" while Richard Jackson Harris and Christina L. Scott revisit sexuality in their essay, "Effects of Sex in the Media."

In "Minorities and the Mass Media: Television into the 21st Century," Bradley S. Greenberg, Dana Mastro, and Jeffrey E. Brand update "the status of social science examinations of racial/ethnic minorities and television" by summarizing research efforts in content analysis, usage patterns, and effects studies (p. 333). David W. Stewart, Paulos Pavlou, and Scott Ward present the theory and research in one applied area, "Media Influences on Marketing Communications,"

while Shalom M. Fisch looks to another in "Vast Wasteland or Vast Opportunity? Effects of Educational Television on Children's Academic Knowledge, Skills, and Attitudes."

Ronald E. Rice and Charles K. Atkin cover "Communication Campaigns: Theory, Design, Implementation, and Evaluation" in Chapter 16. In Chapter 17, Jane D. Brown and Kim Walsh-Childers focus on one particular kind of campaign: "Effects of Media on Personal and Public Health."

The tendency of people to judge that the mass media affect other people's perceptions and attitudes but not their own is known as "the third-person effect." The relevant research is presented by Richard M. Perloff in a chapter with that title. In her chapter Mary Beth Oliver summarizes the work on "Individual Differences in Media Effects," while Alan M. Rubin updates studies and theory on "The Uses-and-Gratifications Perspective of Media Effects." One specific kind of media use lies in entertainment, which Jennings Bryant and Dorina Miron turn to in their chapter, "Entertainment as Media Effect."

Finally, Norbert Mundorf and Kenneth R. Laird present the fruits of a much more recent topic of investigation: "Social and Psychological Effects of Information Technologies and Other Interactive Media."

As noted earlier, each chapter contains its own bibliography; if added together these would total 114 pages. The book also contains author and subject indices.

—PAS

**Charlton, Tony, Barrie Gunter, and Andrew Hannon** (eds.). *Broadcast Television Effects in a Remote Community*. Mahwah, NJ: Lawrence Erlbaum Associates Publishers, 2002. Pp. xx, 169. ISBN 0-8058-3735-3 (hb.) \$39.95 (Special prepaid price \$18.50)

This book continues a debate that some scholars consider finished. The issue of effects (usually negative) of television viewing by children began with the spread of the medium in the 1950s. Himmelweit *et al.* (1957) were the first to examine the issue in depth in their original book, but the issue changed from displacement of leisure activities of kids (like reading) to the more alarming possibility that the viewing of televised violence could generate aggression in children that Bandura and colleagues had developed in the early 1960s in a series of classic experiments (Bandura, 1965). Although this has been a heavily researched

area for almost 50 years, the final answer is not yet in.

This brief book by UK researchers has several things to recommend it to readers: it covers the introduction in 1995 of television to a community on the tiny British island of St. Helena in the South Atlantic; it has a sophisticated research design with multiple measures that was carried out over six years (pre-test measures for two years and post-test for almost four); the arguments from these research findings about effects benefit from a careful analysis of much of the prior literature, including the few studies that also covered the introduction of television into a previously unexposed community; the conclusions do not fall into the trap of defending extreme positions regarding television effects, but rather raise central issues along with nuanced conclusions.

The book consists of seven chapters: island background and a brief history of the project; an anthropological analysis of the social and familial contexts of the small island community; a chapter on the content analysis of the first three years of television programming; a chapter on the "substitution hypothesis" or the change in children's leisure activities after television's introduction; a study of the relationship between children's viewing habits and their social behavior; an analysis of changes in observed social behavior of children before and after television's arrival; a final commentary on the findings and implications for future research (and on the continuation of the project itself). There is a very lengthy bibliography and detailed author and subject indices.

A comment on design and methods is in order. This is a very thorough before/after naturalistic research study that is rare in the literature. There are sizeable samples of preschool and 8 year olds as well as some sampling of opinions of high school students though the focus is on the younger sets of children. Baseline studies of social behavior include a teacher assessment of students, an analysis of videotapes on schoolground play activities as well as older student self-assessments. The teacher assessments were tied to the individual students' viewing behaviors of violent programs as assessed by the content analysis. The naturalistic setting and the qualitative parts of the study combined with the quantitative results to enhance the external validity of the work. The use of the multi-year and multi-methods design add to the strength of the conclusions.

The conclusions were that the 3-5 year old preschoolers and the 8 year olds were relatively unaffected in their social behavior by exposure to televi-

sion. The authors attribute this to the relatively strong social controls exerted by families and the small communities on this island. Their argument underlines the importance of the contextual factors in television viewing effects that are so often missing in the vast majority of experimental and survey results over the last four decades. The authors do not conclude that their findings are permanent. Rather they suggest that St. Helena's relative isolation may be breached by television's arrival and the increased need to seek employment outside the island; further observation over an even longer period (which they plan to carry out) may reveal more negative effects as the island becomes more connected with the larger world.

The relevance of the book for the violence and media tradition's focus on children is an important reason to read the book. It does not force the debate into an either/or position (television does or does not contribute to aggressive behavior in young viewers), but it adds an important piece of evidence on the context of viewing and how that can affect the results. Although there is no definitive answer to the long debate, the book provides researchers with an example of how the debate should be carried on in the future.

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**Countryman, John C.** (ed.). *Theatre and Politics in the Twentieth Century. Theatre Symposium*, vol. 9. Tuscaloosa: Southeastern Theatre Conference and The University of Alabama Press, 2001. Pp. 130. ISBN 0-8173-1111-4. (ISSN 1065-4917). \$20 (individuals); \$25 (institutions); \$25 (foreign). University of Alabama Press, P.O. Box 870380, Tuscaloosa, AL 35487-0380.

This issue of *Theatre Symposium* publishes a dozen papers from an April 2000 conference on theatre and politics. While each examines political activism and the political possibilities of the theatre, most address American productions or companies in an historical fashion.

Carol Burbank examines the work of the San Francisco Bay Area group, Ladies Against Women, tracing their history from anti-nuclear protest theatre to "satirical gender play in the 1980s." Jonathan Chambers looks to the 1927 opening of John Howard Lawson's *The International* in order to situate Lawson's "path to commitment" to political ends. Lawson and The New Playwright's Theatre showed the influence of Brecht in their work. In one of the studies not based on U.S. work, Steve Earnest turns to Brecht, comparing his work to that of Heiner Müller.

Other studies in the volume include Kurt Eisen writing about the controversies over the Federal Theatre Project in the late 1930s; James Fisher, on the work of the Italian playwright and performer Dario Fo; Anne Fletcher, on the Broadway designer and theorist Mordecai Gorelik; Susan Kattwinkel, on variety theatre and government in the United States; and Jeff Turner, on "the politics of Whiteness" and Wilder's *Our Town*.

—PAS

**Eilers, SVD, Franz-Josef** (Ed.). *Church and Social Communication in Asia: Documents, Analysis, Experiences*. FABC-OSC Book Series, Vol. 1. Manila: Logos (Divine Word) Publications, Inc., 2002. Pp. 148. No ISBN. (pb.) no price. (Orders: FABC-OSC. P.O. Box 2036, 1099 Manila, Philippines).

The 1992 Vatican Pastoral Instruction *Aetatis Novae* asked each Catholic diocese and conference of bishops to prepare a pastoral plan of communication. The Federation of Asian Bishops' Conferences-Office of Social Communication (FABC-OSC) has led this process in the various regions of Asia and has now begun publishing a book series documenting its work.

This first volume presents documents issued by various gatherings: "Communication Challenges in Asia" (1996), "A New Way of Being Church in Asia—Communication Consequences" (1997); "Special Communication Perspectives and Challenges" (1998); "Megatrends Asia: Communication Trends for the Church?" (1999); "A Renewed Church in Asia: *Communicating Love and Service*" (2000); and "Novo Millennio Ineunte: FABC Concerns—Communication Challenges" (2001).

Other documents include material on a research agenda for Church and religion in Asia, a statement on evangelization and communication, one on public relations, one on establishing church communication

offices, one on new technologies, and a final one on communication in preparation for priestly ministry. Fr. Eilers, the book's editor, provides a synthesis of the documents as well as two longer analytic pieces on the role of communication in the Church, particularly in Asia.

The book concludes with three descriptive articles on various communication and research projects: Radio Veritas Asia, the Asian Research Center for Religion and Social Communication, and the Communication Office of the Catholic Bishops' Conference of India.

—PAS

**FisherKeller, JoEllen.** *Growing Up with Television: Everyday Learning among Young Adolescents.* Philadelphia: Temple University Press, 2002. Pp. xi, 210. ISBN 1-56639-952-1 (hb.) \$69.50; 1-56639-953-X (pb.) \$19.95.

This is an ethnographic, qualitative study "about young people growing up in television culture," based on interviews with the young people focusing on two questions: "How do youths make sense of themselves in a world permeated by corporate media such as TV? How do youths learn how to be successful and powerful members of TV culture?" (p. 3).

Chapter 1 presents the context of the study as manifested by prior psychological and other research: TV as a "vexing commodity," "learning and developing in postmodern times," and the "everyday spaces of young adolescent time," especially as this context shapes the world of the three New York City children interviewed in depth for the study.

Chapters 2, 3, and 4 are "portraits" drawn from the author's interviews with Marina, a 12-year-old Hispanic-American girl, Christopher, a 12-year-old African-American boy, and Samantha, a 13-year-old Irish-Jewish-American girl. Chapters 5, "The Dynamics of Everyday Learning," and 6, "The Dilemmas of Growing Up with Multiple Media and Cultures," develop the author's perspective on the preceding interviews, in part by introducing insights from interviews with other children of different cultural backgrounds—specifically an 11-year-old Jamaican-American girl and a 12-year-old Puerto Rican American girl.

In an Epilogue, FisherKeller reports on audio taped interviews with Marina, Christopher and Samantha approximately five years after the initial interviews.

An appendix precedes a "Media Glossary" (pp.

171-195) describing shows and personalities mentioned in the interviews.

A list of "works cited" and an index are supplied.

—William E. Biernatzki, S.J.

**Heins, Marjorie, & Christina Cho.** *Media Literacy: An Alternative to Censorship.* New York: Free Expression Policy Project, 2002. Pp. 56. No ISBN (pb.) no price. (Contact: Free Expression Policy Project [an affiliate of the National Coalition Against Censorship], 275 Seventh Ave., 9th floor, New York, NY 10001, USA - Website: [www.feproject.org](http://www.feproject.org))

The authors believe both that media literacy "has become as essential a skill as the ability to read the printed word," and that "media literacy education can relieve the pressures for censorship that have, over the last decade, distorted the political process, threatened First Amendment values, and distracted policymakers from truly effective approaches to widely shared concerns about the mass media's influence on youth" (p. 1).

"Many reasons" are cited as to why censorship is an unsatisfactory approach to ameliorating the effects of media on youth (p. 2). Media literacy education, on the other hand "empowers young people" by teaching them "how media messages are made and how they differ from reality" and by showing them "how to analyze those messages" in their various forms and contexts" (p. 3).

Three chapters describe what media literacy education is, sketch its history in the United States, and describe "media literacy today" in terms of advocacy and information group initiatives, state initiatives, and "the international scene"—in which "while media literacy continues to develop by fits and starts in the U.S., in many other countries it is accepted as an essential part of basic education" (p. 32).

The conclusion reiterates the call for universal media literacy education as preferable to censorship in responding to "continuing concerns about sexual messages, stereotypes, and fantasy violence in the mass media" (p. 38).

A list of five policy recommendations for improving U.S. media literacy education follows (p. 39).

Endnotes, a bibliography and an index are included.

—WEB

**ITEST.** *Genetics/Nutrition: Some Relatively Unexplored Considerations—Proceedings of the ITEST Workshop, October 2001.* St. Louis: ITEST Faith/

Science Press, 2002. Pp. iii, 242. ISBN 1-885583-10-9 (pb.). \$12.95 (\$9.99 for ITEST members - 3601 Lindell Blvd., St. Louis, MO 63108, USA).

The October 2001 workshop of the Institute for Theological Encounter with Science and Technology (ITEST) was held in the shadow of the terrorist attacks of September 11, 2001, as Father Robert Brungs, S.J., Director of ITEST, points out in his Foreword. More directly relevant to the workshop's topic was the ongoing debate about the safety of genetic modification of food products—a debate that was especially intense in the United States when the workshop was being planned but had moderated somewhat by the time it actually took place. More recently, the currency of the topic has been underlined by debates in Europe over the importation of genetically modified food products from the United States and accompanying threats to ban such imports.

ITEST workshops' usual format was followed, with expert papers providing material for later discussion by the whole group of participants, who represented a wide range of disciplines.

Plant geneticist Dr. Brett H. Bussler outlined the history of plant genetics, noting that “the products of biotechnology have been tested more extensively than any other food product in the history of agriculture” (p. 12).

Drs. Anthony R. Torkelson, a medical biochemist, and Mark E. Smith, a biochemical consultant, continued the historical discussion, focusing on “the impact of new and old technologies on drugs from plants.” They concluded that, although we should fear biotechnology and carry out research cautiously, in doing so we should not shut down the research which will help avoid its dangers.

Professor Charles F. Sing of the Department of Human Genetics of the University of Michigan in Ann Arbor, called for a change towards a more holistic approach in “the way we do science and apply it,” in order to solve some of the problems caused in the past by skewed values and shortsighted goals.

Dr. Frederick Kirschmann, a pioneer in the field of sustainable agriculture, who holds a Ph.D. in philosophy from the University of Chicago, discussed “alternatives to agricultural biotechnology” in a previously-delivered paper which raises a wide range of objections to biotechnology and emphasizes that there is a wide range of safer and more cost-effective alternatives.

Father Brungs, whose doctorate is in physics, discussed the relationship between genetics and Christian

stewardship in developing a holistic and sustainable approach to solving the world's food needs.

The discussion sessions reported on in the remainder of the book were stimulated by additional brief papers. Broader issues of weak points in contemporary culture were noted, and the group arrived at a consensus that a broadly holistic approach was needed in which various particular disciplines and solutions would have their own niches to fill and would be balanced by each other.

A subject index and a list of participants are included in the volume.

—WEB

**Joshva Raja, John.** *Facing the Reality of Communication: Culture, Church and Communication.* Delhi: ISPCK, 2001. Pp. xiv, 339. ISBN 81-7214-605-1 (pb.) Rs. 175.00; \$17.00; £14.00. (Contact: Department of Communication, United Theological College, PB 4613, 63 Miller's Road, Bangalore 560 046, India — e-mail: joshvajohn@hotmail.com).

The author, who is a minister of the Church of South India and acting chairperson of the United Theological College, Bangalore, says that “the purpose of this book is to encourage the Christian communicators to recognize the present problems in their communication and to provide them an alternative interactive model of communication” (p. 10). The aim of the research on which the book is based is described as “. . . to develop a theological basis for an interactive approach to Christian communication from the analysis of Jesus' parables,” based on needs identified both by “reports from the WCC [World Council of Churches] Assemblies and documents of the Pontifical commissions” (p. xiii).

Chapters, after an introduction, present an “interactive perspective on Christian communication,” discuss “interactive characteristics of Jesus' parables,” focus on “the interactive nature of the parable of the Good Samaritan,” and draw out the “principles of Christian communication,” from Jesus' parables. Chapter 6 applies the principles “to the practice of Christian communication in South India.” Chapter 7 discusses “the Indian Churches' participation in people's process,” with stress on the video ministry. In conclusion, Chapter 8 cites the relevance of “the study of parables and principles of communication” to Indian theological training and Christian media and to both the WCC and the Pontifical Commission, with suggestions for further research.

Four appendixes classify and define parables and discuss their interpretation, provide a map of India, and list relevant texts and their possible dating.

A bibliography is provided, but no index.

—WEB

**Lewis, Hedwig [S.J.].** *Body Language: A Guide for Professionals*. Second edition. New Delhi/Thousand Oaks/London: Sage (Response Books), 2000. Pp. 207. ISBN 0-7619-9491-2 (US-pb) \$24.95; 81-7036-967-3 (India-pb) no price.

Both the success of the first edition (1998) and the wish to clarify and update some sections, as well as to add new drawings and special blocks of information, justified this new edition so soon after the publication of the first, in the author's view (p. 7).

After stressing the importance of body language in communication and that verbal communication would not only be flat, shallow, and unexciting but even "inaccurate" without accompanying body language, Lewis states the objectives of the work:

It will serve as a working manual in our personal encounters with people—individuals as well as groups. It will be a useful tool in the hands of managers and subordinates in an office set-up, marketing executives on their rounds, teachers, parents, and especially those who are in the "helping professions"—nurses, counselors, social workers, and so on. (p.10)

Acknowledging that "every signal will not mean the same thing all the time," the author nevertheless feels that "when the same signs appear in similar situations, time after time, we can rather safely interpret their meaning" (p. 14). Drawing heavily on the scientific literature on body language that psychologists, sociologists, and others have built up over the past half century during which the topic has been of special interest to empirical researchers, he describes the general characteristics of body language in Chapter 1. Chapters are then devoted to the face, "the most significant—and the most photographed—part of the human body" (p. 62), the eyes, the hands, and the legs. Chapter 6 is devoted to "territorial zones and spaces," spatial relationships, and proxemics—the ways people appreciate, use and interpret space in their interactions. Chapter 7 singles out certain traits and attitudes and studies "what form of gestures or gesture clusters communicate them" (p. 165).

Each chapter is followed by a "Summing Up"

section that suggests how material covered in that chapter can be used "to project the power of our personality through body language" (p. 188). The concluding chapter outlines a practice session containing "exercises that will help you test how accurately and quickly you can interpret the gestures discussed in this book" (p. 189). A list of references and an index are provided, and the book is illustrated with numerous line drawings.

Hedwig Lewis is a Jesuit and Principal Emeritus at St. Xavier's College, Ahmedabad, India.

—WEB

**Manheim, Jarol B.** *The Death of a Thousand Cuts: Corporate Campaigns and the Attack on the Corporation*. Mahwah, NJ/London: Lawrence Erlbaum Associates, 2001. Pp. xvii, 362. ISBN 0-8058-3831-7 (hb.) \$39.95.

Corporate campaigns, pioneered by American labor unions in the 1970s, have become a permanent feature of the political communication landscape. These campaigns entail widespread and coordinated efforts to disrupt a company's relationships with its stakeholders and prevent it from doing business as usual. Campaigns may be brought for economic motives, by unions seeking better compensation or working conditions for members, or even by corporate competitors in search of advantages in the marketplace. Campaigns may also stem from political grievances, such as environmental groups' recent campaign that convinced Home Depot to stop selling old growth wood in its stores. Tactics go well beyond the traditional strike or demonstration, extending to multiple secondary targets that can apply pressure to the corporation. These tactics may include litigation, complaints to regulatory agencies, shareholder resolutions, boycotts, and negative publicity about the company's financial situation, product quality and social responsibility.

Jarol Manheim, of George Washington University, offers the first book-length treatment of the history, strategy and conduct of corporate campaigns in the political communication literature. A specialist on strategic communication in politics, Manheim writes insightfully if not sympathetically about corporate campaigns and those who launch them.

The first three chapters of the book make a historical argument, attributing the rise of corporate campaigns to four enabling factors. Manheim maintains that campaigns, like all strategic communication, rely

on the social scientific revolution in applied research on political behavior and communication of the 1950s, which offered the tools for devising strategy and measuring its impacts. A second factor is the rise of campaign professionals in public relations, polling and political strategy, who carry out much of the research, design and implementation of campaigns. In addition, Manheim traces early corporate campaigns to specific activists and organizations in the New Left, who understood the corporation to be the significant actor on the political scene, and who turned their critique on particular firms' behavior rather than on capitalism itself. Finally, he presents the corporate campaign as a response to the waning power of labor unions, offering an alternative to traditional organizing methods that reflects labor's need to win support from other corporate stakeholders to succeed.

Chapters 4 through 7 describe the growth of labor and non-labor campaigns since the 1970s, illustrated with examples throughout. Here, Manheim identifies the major labor, religious, community organizing, women's, and environmental organizations that have launched corporate campaigns. He also discusses efforts organized by corporations themselves to target competitors, such as the alliance of high technology firms that supported anti-trust regulation of Microsoft in the 1990s. These chapters also contrast the goals and resources of labor and non-labor campaigners, noting, for example, that non-labor opponents tend to be more politically motivated and bring a wider range of demands because these groups have less stake than unions in preserving a company to provide jobs for their members. Because non-labor groups tend to enjoy fewer resources, their campaigns are generally more sporadic and media-dependent, relying especially on the Internet.

The remaining nine chapters discuss the conduct of corporate campaigns. Manheim describes how practitioners research vulnerabilities suggested by a company's relationships with stakeholders, its market position and structure. He lays out the criteria used to decide whether to begin a campaign and to develop strategy. Separate chapters cover campaigners' techniques for reaching key secondary targets—financial institutions, customers, employees, and government.

Manheim then turns to communication proper, showing how almost every action taken by a campaign is meant to communicate with targets, funders, or publics. He discusses how campaigners craft messages that aim to persuade stakeholders it is in their self-

interest to support the campaign's goals, and outlines recurring themes that portray the corporation as violating widely-held values. He breaks down the roles played by various stakeholders in transmitting the campaign's message, noting those that can be especially effective in legitimizing it (employees, whistle blowers), mediating and distributing it (financial and industry analysts, the mass media), and so on. A separate chapter considers the importance of the Internet for contemporary campaigns.

Manheim concludes by foreseeing more issue-oriented "metacampaigns," such as those against use of sweatshop labor and globalization, which employ corporate campaign tactics but do not focus narrowly on a single company. These metacampaigns, he argues, have become the main means of rejoining labor and the left since the 1960s.

The book boasts eight pages of color photos and graphics plus numerous black and white figures depicting examples of campaign communication and strategy. Two appendices, totaling thirty-five pages, list labor and non-labor campaigns from 1974 to 1999. Endnotes follow each chapter and the book is fully indexed.

—Chad Raphael  
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**Mirel, Barbara, and Rachel Spilka.** (eds.). *Reshaping Technical Communication: New Directions and Challenges for the 21st Century*. Mahwah, NJ: Lawrence Erlbaum Associates, 2002. Pp. xiv, 216. ISBN 0-8058-3517-2 (hb.) \$59.95. (Special prepaid price: \$29.95.)

Technical communication stands at a crossroads. Writing about expanded roles for technical communicators, Lori Anschuetz and Stephanie Rosenbaum, propose two definitions that illustrate the choices:

One choice is to define technical communication traditionally, as a field that involves the design and development of information products—print documentation, online help, interfaces, multimedia presentations—and whose aim is to communicate technologies so that users can assimilate them into their everyday goals and work. An alternative choice is to define technical communication more expansively, as a comprehensive network of activities, knowledge, and skills that help technologies be useful, usable, learnable, enjoyable, memorable, marketable, competitive, and of high quality. (p. 150)

This choice stakes out one controversy addressed by *Reshaping Technical Communication*. As an applied field that cuts across most communication practices, technical communication must also keep up with new media and new modes of expression.

Another controversy the book addresses also stems from the applied nature of the field: the relationship between academics and practitioners. Again, given the changing nature of what technical communicators do, teachers and practitioners must work together in preparing the next generation of workers; however, the two represent, in the view of R. Stanley Dicks, two cultures. He argues that the two groups differ in five important areas: perception of information, discourse styles, views on collaboration, assumptions about employment, and reward structures (p. 14).

In order to explore these differences and to propose some resolutions, the editors divide the book into two parts: "Revising Industry and Academia" and "Re-envisioning the Profession." Each part presents a number of essays, which together sketch an image of the current state of the field and offer a vision of its possibilities. In addition to Dicks's essay on the academic versus practical culture of technical communication, part one contains Deborah Bosley's writing about changing the academic perspective, Ann Blakeslee's exploring "the space where academic and workplace cultures meet," Anthony Paré's proposing "a participatory action approach to workplace communication," and Stephen Bernhardt's noting ways to creative "productive tension between academia and industry."

In their introduction to Part I, the editors note that "whether the academic-industry relationship is a gap or not is less a concern than whether these two worlds can find ways to pull together" (p. 11). Both groups, they remark, seek to improve research, theory, practice, and training.

Part II examines ways in which technical communication professionals and teachers might achieve these goals. Rachel Spilka argues that the groups must more consciously become a profession and notes the progress made through the growth of professional associations. Karen Schriver addresses those working in the area of information design and urges new ways of designing and disseminating research. Too often, she writes, researchers ignore the needs of key stakeholders—professionals, citizens, and consumers. For each group she identifies expectations in genre, media, and format of research; biases about tone; and "assumptions about what constitutes an interesting finding." Brenton Faber

and Johndan Jonson-Eilola urge more strategic thinking about technical communication and its directions, building on their work in preparing students.

Anschuetz and Rosenbaum propose expanded roles for technical communication, opting for the second definition quoted above. Employing a series of case histories, they suggest a number of new roles for technical communication workers: associate partner for technology, usability lab manager, interface design manager, marketing writer, business operations strategist, and so on. In her essay, Barbara Mirel (one of the volume's editors) proposes a new vision for usability, defining its terms particularly in complex tasks. In the concluding chapter Russell Borland uses a series of stories to illustrate the importance of various aspects of technical communication—audience, task, product categories, ease of learning vs. ease of use, and level of learning addressed by the technical communicator.

As an appendix, the book includes a proposed research agenda for technical communication, arranging topics under the general headings of "user and task analysis"; "communication in context"; "design choices"; "guidelines and conventions"; "analyzing and improving usability"; "support for information access, retrieval, and analysis"; "development"; "international communication"; "production tools"; "project management"; "literacies"; and "global conceptual questions" (pp. 199-201).

The book contains author and subject indices.

—PAS

**Mogel, Leonard.** *Making It in Public Relations: An Insider's Guide to Career Opportunities*, Second Edition. Mahwah, NJ/London: Lawrence Erlbaum Associates, 2002. Pp. xiii, 349. ISBN 0-8058-4021-4 (hb.) \$79.95; 0-8058-4022-2 (pb.) \$24.50.

The first chapter presents "a very short history of public relations," and is followed by chapters describing what public relations is and does, its components, and how it is embodied in larger and smaller firms. Corporate affairs at the Bank of America are examined as are public relations for diverse organizations. Subsequent chapters describe various dimensions and contexts of public relations activities, starting with the media and employee communications, speech writing, then particular areas such as public affairs, brand marketing, financial public relations, the entertainment industry, healthcare, crisis communication, new media, and colleges. Chapters also list and describe public

relations organizations and publications, and how to search for a job in public relations.

A final chapter speculates on future developments and changes in the field. Endnotes, a glossary, a list of recommended readings, and an “author index” (containing some subjects, as well) are included.

—WEB

**O’Neill, Onora.** *A Question of Trust: The BBC Reith Lectures 2002.* Cambridge, UK: Cambridge University Press, 2002. Pp. vii, 100. ISBN 0-521-82304-8 (hb.) £25.00, 0-521-52996-4 (pb.) £9.95.

The annual BBC Reith Lectures series was delivered in the spring of 2002 by Onora O’Neill, Principal of Newnham College, Cambridge, and noted scholar in political philosophy, ethics, and Kantian studies. The five lectures are on the theme of the crisis of trust in the contemporary world and its debilitating effect on society and democracy.

O’Neill remarks in her Preface “that the evidence that we face a crisis of trust is very mixed. We often express suspicion, yet we constantly place trust in others” (p. vii). There is a difference between the low level of trust in public officials and professionals shown in the opinion polls and the active trust—often at the risk of our lives—revealed in daily life: trust in drinking water, food, other drivers, medicines, etc. (p. 11). She concludes Chapter 1, “Spreading Suspicions,” suggesting that a crisis of trust may be “evidence of an unrealistic hankering for a world in which safety and compliance are total . . .” and that “perhaps the culture of accountability that we are relentlessly building for ourselves actually damages trust rather than supporting it” (p. 19).

Chapter 2, “Trust and Terror,” notes that “terror is the ultimate denier and destroyer of trust.” Terrorism destroys human rights and the passive attitude into which we can fall, regarding human rights as an “entitlement.” “If we really want human rights we have to act—and to meet our duties to one another” (p. 39).

In Chapter 3, “Called to Account,” O’Neill says that “currently fashionable methods of accountability damage rather than repair trust,” and that we need, instead, an intelligent accountability “that will not damage professional performance” (pp. 57-58).

Similarly, Chapter 4, “Trust and Transparency,” suggests that excessive availability of information can damage trust, not increase it.

Chapter 5, “Licence to Deceive?” calls for “a more robust public culture” in which “*a free press can and should be an accountable press*” (p. 93—italics hers). “The press has no licence to deceive; and we have no reasons to think that a free press needs such a licence” (p. 100).

There are no index, notes, or bibliography.

—WEB

**Picard, Robert G.** (Ed.). *Media Firms: Structures, Operations and Performance.* Mahwah, NJ/London: Lawrence Erlbaum Associates, 2002. Pp. 267. ISBN 0-8058-4165-2 (hb.) \$55.00 (Special prepaid price: \$32.50.)

The editor gives the general aim of the book as to correct what is perceived as a certain “narrowness” in media economics research that has paid inadequate attention to explaining “how and why individual media companies behave as they do and how their choices and decisions create or respond to the conditions and forces found in the industry” (p. 1). A focus on individual companies is said to be needed to supplement studies of industry structures and both national and local market analyses by providing “a clear picture of market dynamics and the pressures that lead company executives to make economic choices” and choices about company structures, activities and performance as well as “why certain market structures emerge and why media and communication industries exist in various forms and produce different results” (pp. 1-2).

The book’s sixteen contributors represent a widely international spectrum, ranging from Scandinavia, the Netherlands, Russia, and the United States, to Spain, Greece, Australia, Chile, and Taiwan.

Topics dealt with include media product analysis, technological change, competition, innovation, markets, online media business, characteristics of the top six media firms, internationalization, satellites, telecoms’ broadband strategies, evaluation of Internet journalistic work, human factors in enterprise performance, and customer satisfaction. Each topic is discussed in a particular national context.

Subject and author indices are provided, as well as a list with the identities of the contributors.

—WEB

**Reese, Stephen D., Oscar H. Gandy, Jr., and August E. Grant** (eds.). *Framing Public Life: Perspectives on Media and Our Understanding of the Social World.*

Mahwah, NJ/London: Lawrence Erlbaum Associates, 2001. Pp. xvi, 399. ISBN 0-8058-3653-5 (hb.) \$39.95

Since anthropologist-psychologist Gregory Bateson and sociologist Erving Goffman introduced the concept of framing in the early 1970s it has been widely adopted and adapted by scholars in many disciplines, including communication, and entered the lexicon of public relations and journalism practitioners. In its most basic definition, offered here by William Gamson, a frame is “a central organizing principle that holds together and gives coherence to a diverse array of symbols or idea elements” (p. x) in a text. The study of framing also extends to how message producers select and construct frames, and how audiences interpret and act on them. In journalism, for example, the framing process allows reporters to generate news on deadline by fitting new and complex developments into established ways of understanding a “natural disaster story” or a “government corruption story” or other common frames. Once journalists select a frame, often unconsciously, they know what questions to ask sources, what pictures to show, what evidence to gather, and how to tell the tale.

However, one of the shortcomings of framing’s popularity is that it has been defined and redefined so often by its many admirers that its meaning is often murky or disputed. Indeed, in different hands framing may be held forth as a concept, paradigm, or full-blown theory. The book’s introduction (by Reese) and conclusion (by Gandy) review and critique the many uses of framing in the literature. In between, the volume’s editors set out to “lay solid theoretical and methodological foundations for the study of framing,” and to examine how it might be applied to and altered by new media. Throughout, the focus is mainly on news texts and their audiences.

The book parses into three sections. Part one examines theory and methods of framing research, including a debate over whether framing can be subsumed within agenda-setting theory or not, quantitative methods for identifying and measuring frames in texts through content analysis, and qualitative methods of postmodern frame analysis. Part two includes case studies drawing on diverse methods and subjects of framing research, including news coverage of social movements, race, war, media ethics, outlaws and lesbians. This section concludes with several studies of framing effects on audiences’ political attitudes and behavior. Part three considers questions posed for

framing research by the new media landscape of the internet and related technologies. Authors note that the greater user control and speed offered by web hyperlinks, omnidirectional cameras that allow audiences to choose their own angle, and other technologies challenge media organizations’ editorial control and power over framing news, and grapple with whether that control will be ceded to the public, news makers, or public relations professionals. Another chapter demonstrates how print media adopt the visual rhetoric of the web, altering their framing of advertisements.

Each essay is followed by references. The book includes both an author and subject index.

—CR

**Russomanno, Joseph.** *Speaking Our Minds: Conversations with the People Behind Landmark First Amendment Cases.* Mahwah, NJ: Lawrence Erlbaum Associates. 2002. Pp. xxii, 476. ISBN 0-8058-3767-1 (hb.) \$99.95; 0-8058-3768-X (pb.) \$39.95.

In this book Joseph Russomanno, a professor in the Walter Cronkite School of Journalism and Mass Communication at Arizona State University, presents oral histories of 10 recent First Amendment (that is, freedom of expression) court cases, extending from 1965 to 1996. Most of the cases discussed in the volume led to decisions by the United States Supreme Court, though two remained at the Appellate Court level. Each case raises a particular question about what the U.S. Constitution allows in terms either of free expression or of state restriction. In choosing this format, Russomanno wants readers (students of communication law, lawyers, communication scholars, or other interested parties) to discover what the various participants had in mind in pursuing the cases.

Russomanno’s sources include people whose actions triggered the legal processes, the lawyers who argued the cases, and occasionally others who participated at one level or another. Each chapter begins with a brief description of the issue, the relevant events, and a time line. Allowing each person to speak in his or her own words, Russomanno then interweaves their recollections to form a coherent narrative explaining the issues, the points of contention, the experiences of the trials, the strategies of the legal teams, and the importance of the results. The chapters conclude with excerpts from the majority and minority opinions of the Court. Where necessary, Russomanno has placed explanatory material in highlighted boxes, giving the

background of specialized terminology or of related legal decisions.

The overall strategy of the book makes the cases come alive. In the words of Eliot Rothenberg, plaintiff's attorney in *Cohen v. Cowles Media Co.*, "[Y]ou've got flesh and blood people here. It's not just ivory tower general legal principles. People are actually getting hurt" (p. xxi).

Russomanno's 10 cases include *Tinker, et al. v. Des Moines Independent Community School District*, a case exploring whether schools can limit the rights of free expression of students. It began in 1965 when a school suspended three students for wearing black armbands in protest of the Vietnam War and ended with the Supreme Court noting that "students and teachers do not 'shed their constitutional rights to freedom of speech or expression at the schoolhouse gate'" (p. 2). In *R.A.V. v. City of St. Paul*, Minnesota, the issue had to do with the limits to which a city could go in preventing hate speech. In no way endorsing the speech, the Supreme Court struck down the city statute. As Russomanno comments, "It was a law that at its core was in direct conflict with the spirit of the First Amendment because it tried to limit thought (and the expression of it) to those deemed 'acceptable' by a majority" (p. 45).

The issue in *Ollman v. Evans and Novak* is the determination of what "constitutes a statement of fact versus an expression of opinion" (p. 92), particularly as it affects libel. (American law protects the expression of opinion and does not deem it libelous.) In *J.H. Desnick, M.D. Eye Services, Ltd., et al. v. American Broadcasting Companies, Inc., Jon Entine, and Sam Donaldson*, the Courts addressed the issue of privacy and the use of hidden cameras in news reporting.

What of parody? Is this kind of personal attack a libel? These were among the questions the Supreme Court decided in *Hustler Magazine and Larry C. Flynt v. Jerry Falwell*. A very different issue arises in *Cohen v. Cowles Media Company*, where Dan Cohen sued for damages when a newspaper published his name after agreeing to treat him as a confidential source. The Supreme Court ruled "that the First Amendment does not immunize the press from the requirement to adhere to generally applicable laws" (p. 201) and let Cohen's lawsuit proceed. The rights of the press to report the news and the rights of an accused person to a fair trial pit the First Amendment against the Sixth Amendment. This formed the crux of *Nebraska Press Association, et al., v. Stuart, Judge, et al.*, a case in which newspaper

and television news organizations challenged a "gag" order of a judge in a sensational murder trial. The judge wished to avoid jury prejudice and therefore restricted what the press could report. In its decision, the Supreme Court ruled that, although the trial judge acted reasonably, "the order violated the First Amendment, that the alternatives to a prior restraint on the press were not presented, and that it was not shown that the order would achieve its intended purpose" (p. 293).

The case of *44 Liquormart, Inc. and Peoples Super Liquor Stores, Inc. v. Rhode Island and Rhode Island Liquor Stores Association* addresses commercial speech or the content of advertising. In this instance, in an attempt to discourage drinking, Rhode Island banned the publication of prices in liquor advertisements. Here the Court ruled that the "statutes banning the inclusion of prices in advertisements for alcoholic beverages were an abridgement of the First Amendment" (p. 332).

Two recent cases address speech issues in the context of new technologies. *Turner Broadcasting System, Inc., et al. v. Federal Communications Commission, et al.* examines the "must carry" rule, a rule that requires cable television systems to include local broadcasting stations among their channels. In a larger sense, it also addresses whether the government can regulate these newer communication technologies. The complex decision holds that the government does have this power. Finally, *Reno v. American Civil Liberties Union, et al.* asks whether the government can restrict Internet content. The case, a challenge to the Communications Decency Act, resulted in a decision that the Act was vague and overly broad.

There is no index, though the presentation of the book itself groups issues and therefore facilitates finding material.

—PAS

**Smith, Ronald D.** *Strategic Planning for Public Relations*. Mahwah, NJ/London: Lawrence Erlbaum Associates, 2002. Pp. xvi, 344. ISBN 0-8058-4233-0 (pb.) \$39.95.

This text, in the author's words, "offers college and university students a new way to deepen their understanding of public relations and other kinds of strategic communications" (p. xi). Smith describes his approach as "built on a step-by-step unfolding of the planning process most often used in public relations, with explanations, examples and exercises that com-

bine to guide students toward a contemporary understanding of the profession" (*ibid.*). He adds that the text follows a rhythm of exposure to an idea, seeing it in use, then applying it in "a series of easy-to-follow steps" (*ibid.*). The nine chapters, or "steps," are grouped under four "phases": "Formative Research," "Strategy," "Tactics," and "Evaluative Research."

Steps in the formative research phase involve analyzing first the situation, then the organization (especially its strengths and weaknesses), then the publics. "Strategy" consists in first establishing goals and objectives, then formulating action and response strategies, then using effective communication in accord with rhetorical principles that appeal to both reason and sentiment while employing both verbal and nonverbal communication. The "tactics" phase involves choosing appropriate tactics for relevant media then implementing the strategic plan—not neglecting budgetary aspects. Finally, the evaluative phase necessitates knowing what, when, and how to evaluate, and structuring the report. Important in the report is a "value-added dimension," answering the question, "What did public relations do for the organization as a whole?" (P. 250).

Sections giving examples and proposing exercises follow each step.

Three appendixes discuss "applied research techniques," "ethical standards," and "sample campaigns" illustrating how the four phases were manifested in four prize-winning campaigns. An index is supplied.

—WEB

**Švob-Đoki, Nada** (ed.). *Redefining Cultural Identities: Southeastern Europe*. Zagreb: Institute for International Relations, 2001 (published in Culturelink Joint Publication series No 4). Pp 214. ISBN 953-6096-22-6 (pb.) no price.

This edited book touches a set of important but painful historical and political transitions: first, the transition of the former Communist countries in Southeastern Europe to new political and economic entities struggling to adapt to democratic forms of governance and the operations of capitalism after four decades of socialism; and second, the bitter breakup of Yugoslavia into a variety of independent states with strong ethnic, linguistic and religious identities, often in conflict. The book emerged from a conference on the role of cultural identities in these transitions. The major theme of the book, however, centers around whether

the issue of regional identity for these nations should be the traditional values represented by the name "Balkans" or by the new identities represented by the term "Southeast Europe." The title seems clearly to tilt toward the newer identity, but many thorny issues remain to be worked out.

The book is divided into four sections: Culture, Identity and Southeastern Europe; Cultural Co-operation; Cultural Transition; and Young Authors' Perspectives on Identity. The first section focuses on more general issues of identity research and current theory. The author of the opening chapter provides research results on group identities from his international center in Brussels, calling upon examples from around the globe to promote a thesis that identity formation can have positive impacts on both economic development and democratic transition. He warns readers that identity can also be negative when it is based on the "purity" of its roots or on the narrow concept of "ethnicity." The second chapter deals with a central thesis of whether the regional identity should be Southeast Europe or remain the Balkans. After some brief discussion of the pros and cons of tradition versus change, the author argues for the more Euro-centric tilt while still wanting to maintain traditional cultural heritages of given countries and groups, diversity in the identities of the region and artistic specificity of given countries.

In the two chapters in the next section, representing cases from Croatia and Slovenia, the authors argue for a role of the state in promoting cultural identity and cross-national cultural cooperation. Neither author has good suggestions for how government ministries might develop useful policies for such regional cooperation, but one of them provides a caveat. The unhappy memories of the recent breakup of Yugoslavia still linger in most peoples' minds and present a barrier to cultural collaboration so it needs to be carried out carefully. Moreover, the fact that all countries of the region are still in transition politically and economically makes it difficult to mount genuine cross-national cultural projects that might lead to a more unified regional identity.

In part three on Cultural Transition, the longest section in the book, the five authors tackle the cultural problems the countries face. These chapters are all specific to a given country or a given cultural arena. Topics cover a lot of ground: contemporary Yugoslav art, national language policy in multilingual countries, media reproducing cultural identities, regional emigrants and their cultural adaptations in Italy, and current youth identity issues in Hungary. Most chapters

not only have a specific focus but also rely on some empirical data that strengthens their conclusions.

Finally, three younger scholars from the conference have their say. They deal with psychological dimensions of personal identity and self concept; how a new self image of young voters helps to explain some unexpected outcomes in a national election in Bulgaria in 2001; and a brief report on assimilation of young Croatian immigrants in Italy.

The book's strengths are several: that the important issue of identity is tackled at a serious level in a region that has been historically haunted by conflicting identities; that political and economic issues facing the region are very much tied to the cultural history of the region; and the realization that serious efforts to integrate with the European Union need to be based on this kind of analysis. Shortcomings are there as well: topics are not often substantiated by empirical evidence; the broad approach of different topics does not allow for in-depth treatment of any one issue; it is still unclear how the various political and economic transitions affect national, ethnic and personal identities nor how this in turn will affect future political stability and economic growth for the region. On a positive note, the book is a beginning analysis of important issues that need to be pursued to better define culture's role in these transitions.

—EM

**Tonna, Benjamin.** *Maintaining Momentum: Report on the Signs of the Times 2001.* Floriana VLT 16, Malta: Discern Institute for Research on the Signs of the Times, 2001. Pp. 84. ISBN 99932-0-124-3 (pb.) no price.

This is the eighth, and last, of the annual series of reports on trends in Maltese society from the perspective of Catholic values. The death of Father Benjamin Tonna, director of the Discern Institute and author of the series has terminated the series.

Like the earlier reports, the report for 2001 reviews the events of the previous year as reported in the electronic and print media. "The assumption, here, is that, as soon as an event appears on the media, it becomes public and, as such, attains the potential of influencing people's behavior, their way of life and, ultimately, their culture" (p. 8). After an "Overview" chapter, events in each quarter of 2000 are discussed in terms of four categories—"everyday life," economic life, political life, and social change—and brought

together to evaluate overall trends for the year. Those were seen to be continued gradual development of civil society, in the sense of a growing sense of community.

The frameworks governing the content analysis by which cultural tendencies were evaluated are explained in two appendices. "A Primer on Values," explains the basic elements of the social psychological system of values developed by Dr. Brian Hall, a close collaborator of Tonna. Appendix B, "Hall's Map of Values," is a chart of the relationships between values, goals and means in the various phases and stages of social development envisioned by Tonna and Hall.

—WEB

**van Eemeren, Frans, Rob Grootendorst, & Francisca Snoeck Henkemans.** *Argumentation: Analysis, Evaluation, Presentation.* Mahwah, NJ/London: Lawrence Erlbaum Associates, 2002. Pp. xiv, 195. ISBN 0-8058-3952-6 (pb.) \$27.50.

As an ordinary component of daily life, argumentation surrounds us. This text, by faculty of the Department of Speech Communication, Argumentation Theory, and Rhetoric of the University of Amsterdam, treats argumentation as a rational activity that begins in the differences of opinion so easily recognized among people of good will. Following the book's subtitle, they divide the consideration of arguments into analysis, evaluation, and presentation.

The section on analysis introduces terminology, defines types of differences of opinion, and guides the student in identifying and understanding standpoints. Since such standpoints and premises of argument can be implicit (unexpressed) or expressed, the authors guide the student in uncovering them through contextual clues, an understanding of speech acts, and an analysis of the structures of argumentation. As suited to a teaching text, they move from simpler to more complex arguments, often using diagrams to help the reader sort out the various parts of the discourse.

The second part of the book builds on the analysis of an argument by suggesting methods of evaluation. This section introduces the reader to logical analysis of the kinds of proof (*modus ponens*, *modus tollens*) and to various schemes of argument (causal, by analogy, and so forth). Other chapters in this section examine ten different kinds of common fallacies (violation of the burden-of-proof rule, violation of the unexpressed premise rule, violation of the validity rule, and so on). The authors demonstrate each through examples.

Finally, the book moves from understanding and evaluation to the construction or presentation of arguments. Here the authors attend to both written and oral argumentation. Though this section is shorter than the others, it makes good use of the material presented earlier in the book and, the authors maintain, it should circle back to the first section since the arguments constructed by the student will themselves, as statements of opinion, become subject to analysis and evaluation.

Each chapter concludes with a list for further reading and a set of exercises. Appendices include a summary “overview of rules for critical discussion and fallacies,” a general reference list, and author and subject indices.

—PAS

**Walsh, Andrew** (ed.). *Can Charitable Choice Work? Covering Religion's Impact on Urban Affairs and Social Services*. Hartford, CT: The Pew Program on Religion and the News Media, The Leonard E. Greenberg Center for the Study of Religion in Public Life, Trinity College, 2001. Pp. viii, 200. ISBN 1-931767-02-5 (pb.) n.p. [Contact: tel: +1 (860) 297-2353; fax: (860) 297-5125; e-mail: csrpl@trin-coll.edu]

“Charitable choice” was instituted by the U.S. Congress in 1996 to allow public funding for faith-based charitable organizations without requiring that they divorce their public service functions from their religious activities. Walsh sees this as a move by the “Religious Right” to gain access to public funds, but even some of the conservative religious groups that might benefit from the policy have expressed opposition, some on the grounds that their purely religious work might be harmed by any acceptance of government funds for any purpose (p. 1). The more mainstream churches—Catholic, Lutheran, and Jewish are mentioned—have long been receiving large amounts of government support, but at the cost of separately incorporating their social services and adhering to government regulations, which, for example, prohibit hiring staff members on a basis of religious affiliation (p. 2). Expansion of the policy through legislative action, as advocated by the Bush administration, has erupted in controversy. The present book is intended to help journalists better understand and report on this many-sided issue (p. 4).

The eight contributors were selected for their expertise in various aspects of the question, from disciplinary perspectives that include sociology, political sci-

ence, history, and law (p. 4). Walsh says that most of the contributors expressed caution about the policy, doubting, for example, that smaller religious groups could do much to improve social services and would experience undue administrative complications and distractions if they became involved in the program (p. 5).

The contributors explore various factors that need to be considered in evaluating faith-based initiatives and in forecasting how government funding would impact them. Congregations in U.S. cities are studied by Nancy T. Ammerman, in Chapter 1; then Jan Shipps clarifies regional religious and cultural differences that are often overlooked when “urban problems” are discussed. Gerald Gamm considers how things have changed for American urban religious groups during the period from 1950 to 2000, with special emphasis on the “erosion of Catholic exceptionalism,” as a large proportion of urban Catholics moved to the suburbs. Timothy Matovina discusses the special case of Latino Catholics in American public life, appending a state-by-state list of faith-based community organizations.

In Chapter 5, Peter Dobkin Hall presents a historical overview of the interactions among religion, government and social welfare in America, with the benefits and dilemmas that have grown from them. Mark Chaves looks at the effects on local religious congregations of the “charitable choice” provision in the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, and what effects might be expected in future expansions of the policy. The special situation of black churches is considered by Fredrick C. Harris, in Chapter 7. In the final chapter, Marc D. Stern considers the forms legislation about charitable choice might take in the future.

An appendix contains three articles on the debate over charitable choice written by members of the Greenberg Center’s Staff. Each chapter is followed by a list of “Issues to Keep an Eye On.”

There is no index. References follow each chapter.

—WEB

**Wheeler, Thomas H.** *Phototruth or Photofiction? Ethics and Media Imagery in the Digital Age*. Mahwah, NJ/London: Lawrence Erlbaum Associates, 2002. Pp. xxii, 218. ISBN 0-8058-4261-6 (pb.) \$34.50.

The idea of photographs as true representations of reality dates back to the very beginnings of photography. In his foreword, James D. Kelly notes that in the popular mind, “a photo was reality. It was a scientific

document. . . . we believed the photograph was as objective as mathematics and as clear a view as glass provides" (p. xiii). But photography always was a manipulation of reality. "Indeed, many of its earliest practitioners were more concerned with concocting fantasy than documenting reality. They were artists, not journalists" (p. 3).

During the past two decades digital alteration of photographic imaging has become "so pervasive that authentic photos may soon be looked upon as exceptions, mere throwbacks to a more naive, pre-cyber era" (p. xvii). Yet, people continue to trust mass media photography, raising serious ethical questions for those engaged in photojournalism. These questions probe the very meanings of "journalism" and the "photo," and call for a clearer definition of the point at which "enhancement" of photos becomes their "fictionalization"—an issue the author deals with at length, especially in Chapters 12 through 14 (pp. 133-161).

The book's twenty chapters are grouped as "The History of 'Phototruth'," "Implications of the New Digital Age," "Groundwork Towards a Protocol," and "Developing a Protocol." Illustrations, case studies and quotations are numerous—some of the latter illustrating the many and often conflicting interpretations that can be drawn from the same data.

For example, John Long, former president of the National Press Photographers' Association, is quoted as saying that the "liquid" character of images in computers "is killing documentary journalism" (p. 193). But Bill Ryan of the University of Oregon is quoted on the following page as saying, "I believe average readers know enough about manipulation and its potential for misuse to bring fairly sensitive antennae to their judgment about what they see" (p. 194).

In moving towards the establishment of an ethical "protocol," the historical foundations of philosophical ethics are explored in Chapter 6.

Each chapter closes with a summary, with "Explorations" that raise topics for discussion, and with endnotes. At the end of the book photo credits, a name index, and a subject index are supplied.

—WEB

## Journals Received

*Canadian Journal of Communication*, 27(1). 2002. www.cjc-online.ca

Carol Corbin, Silence and lies: How the industrial fishery constrained voices of ecological conservation. pp. 7-32. The essay examines the communication

processes leading up to the 1992 collapse of the Atlantic cod fishery, noting the various discursive realms: "fishers' vernacular," "scientific language," "official word," and "product talk."

Tamara L. Falicov, Film policy under MERCOSUR: The case of Uruguay. pp. 33-46. This analysis of state economic policy to erase trade barriers concludes that the cultural dimensions of the Latin American Southern Cone trade agreements have not succeeded and have not fostered cross-border film cooperation.

Gary McCarron, Moralizing uncertainty: Suspicion and faith in Hitchcock's *Suspicion*. pp. 47-62. Analyzing Hitchcock's 1941 film, McCarron argues that "suspicion is an interpretive strategy that can be used for making sense of situations that appear ambiguous or uncertain."

Rowland Lorimer, Mass communication: Some redefinitional notes. pp. 63-72. This essay proposes a definition of mass communication that includes the Internet and its decentralized broadcasting, arguing for a more central role for public access.

Walter C. Soderlund, Martha F. Lee, and Paul Gecelovsky, Trends in Canadian newspaper coverage of international news, 1988-2000: Editors' assessments. This study presents data from surveys of Canadian editors regarding international news, tracing a perceived decline and partial recovery in quality and quantity of coverage.

*Canadian Journal of Communication*, 27(2-3). 2002.

Making connections: Culture and social cohesion in the new millennium. Circle/CCRN Roundtable May 26-27, 2000. This double issue presents the papers from a conference on social cohesion and culture. Partly a result of communication, social cohesion also represents a goal of communication systems. The editor, Nancy Duxbury, divides the papers into nine topics: (1) exploring connections; (2) research on cultural diversity, cultural identity, and cultural pluralism; (3) cultural participation; (4) cultural solutions to conflict in Europe and Canada; (5) culture and formation of young minds; (6) global connections; (7) culture and the quality of life in cities; (8) culture and civil society; and (9) new directions for cultural policy research. In addition to the academic voices, this issue presents papers by knowledge workers representing the perspectives of government, businesses, and social organizations.

*Comunicar: Revista Científica Iberoamericana de Comunicación y Educación*, 18 (2002). Published by

Grupos Comunicar, Colectivo Andaluz para la Educación en Medios de Comunicación. Apdo Correos 527, 21080 Huelva, España. [www.grupo-comunicar.com](http://www.grupo-comunicar.com).

The theme of this issue is “Descubrir los medios”; the issue presents a “panorama” of communication research, divided into sections reporting studies, historical work, reflections, proposals, and reports. Contributors come from Argentina, Brazil, Canada, Chile, Colombia, France, Italy, Portugal, Spain, and Venezuela.

The first section includes studies on communication research methodology (Letizia Caronia and André H. Caron); distance education (Cecilia Von Feilitzen); television violence (Geniève Jacquinot); social action, television, and globalization (Tatiana Merlo); proposals for a research agenda (Alejandro Jaramillo); the reactions of parents and children to television (Ferrán Casas, Cristina Figuer, Mónica González, and Carles Alsinet); educational media (Tania Maria Esperon Porto); audience analysis (Carlos Araos); educational television and philosophy of education (León Maturana); and film studies (Enrique Martínez-Salanova). The reflections sections presents essays on new media and education (Alfonso Gutiérrez), on educational technology (Ramón Ignacio Correa and Maria Luisa Fernández), on audiovisual narrative (Begoña Gutiérrez San Miguel), and on media education (Daniel Aranda Juárez). Research proposals include studies on educating marginalized youth through computer networks (Luz María Zañartu); on cinema, drugs, and health (Amando Vega Fuente); on disabilities in film as a means of social education (Olga María Alegre de la Rosa); on music and images in the classroom (Ana María Sedeño Valdellós); on stereotypes and values in the youth press (Agustín Ciudad); and on educational guidance and media education (Juan Manuel Méndez Garrido).

The final section reports on various communication projects: the use of educational media in Venezuela (Maurice Brunner Seco); educational media in European secondary schools (Ricard Huerta); the portrayal of people with disabilities in the media (Raquel Casado Muñoz); online education to prevent forest fires (Federico Luis Clauss); and the formation and continuing education of teachers in communication (Javier Ronda). Two other essays present the results of studies on television advertising of soft drinks and sugared foods (Josefina Santibáñez), and on popular music genres (Emilio Berrocal de Luna and José Gutiérrez Pérez).

The issue also contains brief announcements, book reviews, and information about Spanish-language communication research journals and institutes.

*Culturelink*, special issue 2001. Published by the Institute for International Relations, Zagreb, Croatia.

*Convergence, creative industries and civil society: The new cultural policy*. This tenth anniversary special issue presents a selection of papers from a conference addressing issues of culture, identity, social cohesion, and the creative industries. Papers include Paul Jeffcut, Creativity and convergence in the knowledge economy: Reviewing key themes and issues, pp. 9-18; Stuart Cunningham, From cultural to creative industries: Theory, industry, and policy implications, pp. 19-32; Tom O'Regan, Cultural policy, cultural planning, and creative industries policy making, pp. 33-51; Andy C. Pratt, Understanding the cultural industries: Is more less? pp. 51-65. Other papers address the relationships among the culture industries, cultural policies, and civil society. These include Guiomar Alonso Cano, Towards a global alliance for cultural diversity, pp. 69-72; Indrajit Banerjee, Broadcasting convergence and cultural policy: Critical issues and implications in Malaysia and Singapore, pp. 73-92; Nada Švob-Đoki, Cultural policies and cultural industries in the countries in transition, pp. 93-98; Lisanne Gibson, Creative industries and cultural development: Still a Janus face? pp. 99-110; Charles Landry, Culturally creative cities, pp. 111-118; John Tomlinson, Three modalities of global communication: Explosives, squares, nets, pp. 119-130; and Joha A. Foote, Cultural diversity and governance in Canada, pp. 131-157.

*Culturelink*. 2002. Daniela Angelina Jelini (ed.). *Culture: A driving force for urban tourism—Applications of experiences to countries in transition*. Proceedings of the 1st international seminar on culture: A driving force for urban tourism (2001). These proceedings collect research papers and “best practices” reports on local tourism. Some, such as Frans Schouten’s paper, Effective communication with visitors at heritage sites, explicitly address communication issues.

*Culturelink*, 13 (No. 36). April 2002. *Network of networks for research and cooperation in cultural development*. This issue presents reports on various networking activities and organizations addressing aspects of culture. In addition it summarizes research pro-

grams, international meetings, and regional conferences. Finally, its documentation section lists newsletters, journals, and publications dealing with culture.

*Media Development*, 49(1). 2002. Journal of the World Association for Christian Communication, 357 Kennington Lane, London SE11 5QY England.

Theme: "Mass media and democratisation in Asia and Eastern Europe." Articles include Colin Sparks, Empowering women and men through participatory media structures, pp. 3-6; John D. H. Downing, Issues for media theory in Russia's transition from dictatorship, pp. 7-12; Elena Vartanova, A global balancing act: New structures in the Russian media, pp. 13-17; Junhao Hong, The role of media in China's democratisation, pp. 18-22; Sunny Yoon, Democratisation and restructuring the media industry in South Korea, pp. 23-27; Peter Gross, Media and political society in Eastern Europe, pp. 28-32; Ágnes Gulyás, Democratisation and the mass media in post-communist Hungary, pp. 33-38; and Joseph Man Chan, Media, democracy, and globalisation: A contemporary perspective, pp. 39-44. The issue also includes reviews and a forum section on Afghanistan.

*Media Development*, 49(2). 2002. Theme: "Impunity and the media." The issue examines media responsibility and looks particularly at falsehood, silence, and oblivion. Articles include Philip Lee, A life worth living; Digna Ochoa y Plácido, pp. 3-6; André Jacques, Breaking the silence on the war in Algeria—The fight for truth and reconciliation, pp. 7-10. Djilali Hadjadj, La guerre d'Algérie: 40 ans après, est-ce encore trop tôt? pp. 11-13. Edwin H. Robertson, "Are we still of any use?"—Impunity, the media and Dietrich Bonhoeffer, pp. 14-17. Edgar Gutiérrez, Los medios y la transición democrática en Centroamérica, pp. 18-21. Héctor Schmucler, Verdad e impunidad, pp. 22-25. Charles Villa-Vicencio, Neither too much, nor too little justice: Amnesty in the South African context, pp. 26-29. Jake Lynch, Impunity in journalism, pp. 30-32. Raheb, Mitri. The Red Sea catch: A Palestinian perspective, pp. 33-35. Cees J. Hamelink, Communication may not build peace, but it can certainly contribute to war, pp. 36-37.

*nexum das Netzwerk*, (February 2002). This issue addresses questions of computer-mediated communication, on-line relationships, and identity and virtual reality.

*Quaderni: La revue de la communication*, no. 46 (winter 2001-2002). Edited at the Département de Sciences Politiques, Université Paris I Sorbonne, 17, rue de la Sorbonne, 75231 Paris Cedex 01, France. Subscriptions: Éditions SAPIENTIA, 89-93, avenue Paul-Vaillant Couturier, 94250 Gentilly, France. www.quaderni.com.

Theme: "La Science dans la cité" ["Public science"] includes these articles: Paul Rasse, La médiation scientifique et technique entre vulgarisation et espace public (pp. 73-93); Jean-Marc Lévy-Leblond, Science, culture et public: faux problèmes et vrais question (pp. 95-103); Joëlle Le Marec, Le musée à l'épreuve des thèmes sciences et sociétés: les visiteurs en public (pp. 105-122); Daniel Jacobi, La gestion des contraintes de lexique et des explications litigieuses dans des discours de vulgarisation sur la santé (pp. 123-145); Yves Girault, and Cécile Debart, Le musée forum, un difficile consensus: l'exemple du Muséum National d'Histoire Naturel (pp. 147-162); Jean-Paul Natali, Le développement des conférences, colloques et débats dans les centres de culture scientifique (pp. 163-177). The issue also contains articles on cyber-journalism (Nicolas Péliissier), mediation (Barnard Schiele, and Louise Boucher), and the role of macro-technical discourse in creating a climate of confidence (Pascal Robert).

*Quaderni: La revue de la communication*, no. 47 (spring 2002). Theme: "Le multiculturalisme en quête d'universalité?" ["Multiculturalism in search of universality?"]. Theme articles include Philippe Raynuld, Diversité de la diversité (pp. 47-55); Patrick M. Brantinger, L'avenir des *Cultural Studies* en Amérique du Nord (pp. 57-70); Yves Darcourt Lézat, Essai sur l'entreprise multiculturelle (pp. 71-84); Rodney Benson, Journalisme et marketing: l'enjeu de la diversité (pp. 85-100); Claire Bénit, Multiculturalisme et apartheid: gouvernement urbain et représentation des groupes ethniques à Johannesburg (réflexions à partir de Los Angeles) (pp. 101-117); and Cynthia Ghorra-Gobin, Multiculturalisme et démocratie de représentation: le gouvernement des grandes villes américaines (pp. 119-126). In addition to the theme, the issue contains sections on policy and theory, which present articles on Radio France Internationale (Marie J. Berchoud), urban information technology projects (Bertrand Morvan), and Lacanian research and theory (Frédéric Forest).

*Religion in the News*, 4(3). 2001. Published by The Leonard E. Greenberg Center for the Study of Religion in Public Life, Trinity College, Hartford, CT.

Theme: Religion After 9/11, with articles on news coverage of religious responses (Andrew Walsh), the religious Right (Michael E. Naparstek), Islam (Mark Silk), Pacifism (Dennis R. Hoover), and international religious freedom (T. Jeremy Gunn).

Other articles, not addressing the issue's theme, include coverage of sects in France (Benjamin-Hugo LeBlanc), the stem-cell debate (Ronald M. Green), the book, *The Prayer of Jabez* (Andrew Chase Baker), and the religion beat in a time of news organization economic contraction (Andrew Walsh).

*Religion in the News*, 5(1). 2002.

Themes: The Scandal of Secrecy; Grappling with Islam. The first theme presents articles on the Catholic hierarchy's response to sexual misconduct (Andrew Walsh) and Boston's Cardinal Law and the *Boston Globe* (J. Ashe Reardon). The second, longer section, addresses issues of Afghan women (Christopher McMorris), media coverage of Christian missionaries in Afghanistan (Dennis R. Hoover), Air Force regulations for women stationed in Saudi Arabia (Michael E. Naparstek), and covering Islam in Egypt (James J. Napoli).

*Reseña: Revista de crítica cultural*, 337, 338, and 339 (April, May, June 2002). Published at the Centro Loyola, Editorial and business offices, Pablo Aranda, 3; 28006 Madrid, Spain.

This review publishes theatre, film, music, art, and book reviews of contemporary releases.

*Telemidium: The Journal of Media Literacy*, 48(1). Spring 2002. Published by the National Telemedia Council, Inc., 1922 University Avenue, Madison, WI 53726. [www.NationalTelemediaCouncil.org](http://www.NationalTelemediaCouncil.org).

This issue focuses on pre-school children; articles include Rogow, Faith. The "ABCs" of Media Literacy (pp. 3-5); Catherine Lyon, "There simply must be rabbits" [on programming for children] (pp. 6-7); Joanne Cantor, Television and fear in early childhood (pp. 8-9); Kathleen McDonnell, The house that Walt built [on the Disney studios] (pp. 9-12); Petra Hesse and Feona Lane, Media literacy education with young children (pp. 13-16); Idit Harel, Learning new media literacy: A new necessity for the young clickerati generation (pp. 17-26); Tom Rendon, Implicit media literacy: How

ordinary people should use media (pp. 27-29); Hedda Sharapan, The challenge of creating nurturing TV for young children: Helping children understand themselves, the world around them . . . and even the world of television (pp. 30-35); David M. Considine, No TV: One family's choice (pp. 40-44); Martin Rayala, Fear of television in early childhood (p. 45).

*Tripodos*, 11 and 12 (2001, 2002). Published by the Facultat de Ciències de la Comunicació Blanquerna, Barcelona. c/ Valldonzella 23; 08001 Barcelona, Spain. [www.tripodas.com](http://www.tripodas.com).

Each volume publishes articles addressing a key theme, then adds in more general articles, reviews, and a bibliography. Volume 11 looks at the influence of narrative cinematography. Fernando De Felipe, La narrativa cinematográfica en la época de su retroalimentación mediática (pp. 9-41). "Inclined in its beginnings to openly absorb any cultural reference, artistic discipline, or expressive resource that came within its reach, cinema narrative is currently facing an irreversible crisis which calls into account its very nature as a medium and which foreshadows the dissolution of its uniqueness as the vehicle par excellence of contemporary story-telling." Albert Sáez i Casas, Actualitat contra realitat (pp. 43-53). "Faced with the rush to affirm that the massive consumption of audiovisual products means the replacement of the predominant language in advanced societies, this study observes the influence of the audiovisual narrative in contemporary journalism." Jaume Boix Angelats, De lector a espectador [The reader as viewer] (pp. 55-59). Toni Segarra, Por qué los publicitarios llamamos películas a los anuncios? (pp. 61-66).

Additional articles include a presentation by Paul Ricouer on the occasion of his receiving an honorary doctorate; an essay on translation, translation theory, and approaches to translation (literal vs. free) by Josep Maria Fulquet (pp. 93-105); a paper on the use of sound and music in cartoons and animation by Jaume Radigales (pp. 107-122; and one on perspective in audiovisual narrative by Efrén Cuevas (pp. 123-136).

Volume 12 (2002) continues the theme of narrative cinematography. Josep Maria Fulquet, Falstaff, la comèdia, l'òpera, el film (pp. 9-23). "The objective of this article is to analyse different treatments of Falstaff, the fictional character created by William Shakespeare . . ." on stage, in literature, in the opera, and in film. Josep Rom, La influència del còmic i el discurs fragmentat en el disseny periodístic (pp. 25-34). "Although

the current aesthetic trend of newspapers largely imitates that of television, in this author's judgment, the most important contribution of the audiovisual narrative to the construction of the graphic journalism discourse has been made by another narrative medium: the comic strip." Miquel Tresserras, *El relat impossible: "Lost highway," de David Lynch* (pp. 35-46). This article examines the work of director David Lynch as a site of contemporary critical reflection, particularly addressing the problem of interpreting reality. Ramon Millà i Brunch, *L'aparença de realitat* (pp. 47-66). "Starting from the premise that the attitude of observation is directly associated with the sensation of reality, the . . . article analyses how, in certain shots and later in the editing of the filmed images, there are narrative techniques and patterns for the representation of reality which, based on the construction of audiovisual time and space, cause of sensation of observation in the viewer and, thus, of realism." Joan Sabaté Salazar, *El món dels videojocs i la interacció: narrativa cinematogràfica i narrativa ergòdica* (pp. 67-80). Videogames combine elements of cinema-style narrative and game interaction. "This article proposes an analysis of videogames as cybertexts and a revision of narratological concepts" like perspective and narrator.

The issue also publishes papers from a 2001 conference on the thought of George Steiner.

## Newsletters Received

*ABU News*. Published six times a year by the Asian-Pacific Broadcasting Union, P.O. Box 1164, 59700 Kuala Lumpur, Malaysia. The newsletter publishes news stories and reports on broadcasting issues in Asia.

*Action*. Published monthly by the World Association for Christian Communication, 357 Kennington Lane, London SE11 5QY, England. [www.wacc.org.uk](http://www.wacc.org.uk). The newsletter updates issues supported by WACC, particularly the democratization of communication, communication for human dignity, and the right to communicate in situations of censorship and oppression. To subscribe to an e-mail distribution list, send a blank message to [update-subscribe@lists.wacc.org.uk](mailto:update-subscribe@lists.wacc.org.uk).

*Briefing*. The official documentation and information service of the Catholic Bishops' Conference of England & Wales and Scotland. Published monthly by the Catholic Communications Service, 39 Eccleston Square, London SW1V 1BX, England. [www.catholic-ew.org.uk](http://www.catholic-ew.org.uk).

*circular*. Research and Documentation on Cultural Policies. Published three times a year (in French, English, and Spanish) by the Department of Studies and Future Trends, Ministry of Culture and Communication—France, 2, rue Jean-Lanier, FR-75001 Paris, France. Available online at [www.culture.gouv.fr/dep/fr/catacollec.htm#circular](http://www.culture.gouv.fr/dep/fr/catacollec.htm#circular).

*Communications Update*. "A quarterly round-up of media & communications" published by the Communications Law Centre, The White House, UNSW Sydney NSW 2052, Australia. Available online at [www.comslaw.org.au](http://www.comslaw.org.au). The newsletter "provides news, analysis, and opinion about media, communications, and online services in Australia and overseas."

*FABC-OSC Communication Info*, 17(1-6). 2002. Monthly briefing on communication-related topics, particularly in Asia, from the Federation of Asian Bishops' Conferences, Office of Social Communication, P.O. Box 2036, 1099 Manila, Philippines.

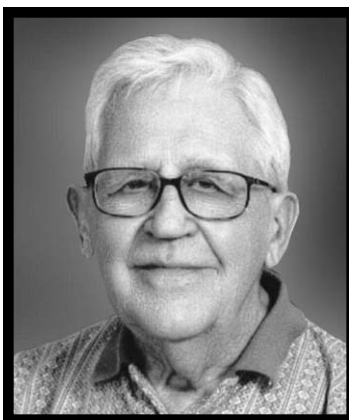
*Intercom Notícias: Boletim Informativo da Intercom*. Sociedade Brasileira de Estudos Interdisciplinares da Comunicação. [www.intercom.org.br](http://www.intercom.org.br). This bi-monthly bulletin reports on the activities of the Brazilian Society for Interdisciplinary Studies. Notices include material on film, journalism, media studies, and other related fields.

*Media and Gender Monitor*. A bi-annual publication from the Women's Programme at the World Association for Christian Communication, 357 Kennington Lane, London SE11 5QY, England. [www.wacc.org.uk](http://www.wacc.org.uk). The newsletter updates key international issues on media and gender, reports on events and conferences, and publishes a forum section.

*MediaForum*. Published bi-monthly by CAMECO, Catholic Media Council, P.O. Box 10 21 04, D-52021, Aachen, Germany. [www.cameco.org](http://www.cameco.org). Summarizes and reports on Church news services and church communication around the world.

*MediaWise*, 16 (Spring 2002). National Institute on Media and the Family. 606 - 24th Avenue South, Suite 606, Minneapolis, MN 55454. [www.mediafamily.org](http://www.mediafamily.org). Brief updates on issues affecting children and media.

**Jean Desautels, S.J.**  
**1914-2002**



Fr. Jean Desautels, executive director of the Centre for the Study of Communication and Culture from 1981 to 1984, died in Manila on August 1, 2002, after a brief illness. Long connected with the educational and communication ministries of the Society of Jesus and the Catholic Church, Fr. Desautels directed the CSCC, the publisher of *Communication Research Trends*, in London, assuming the duties from the late Fr. Stephan Bamberger, S.J., its founding director. He had long had an interest in the CSCC, participating in the preliminary discussions in 1973-1975 that outlined its purposes and structures, visiting London during its establishment in 1977, then serving as executive director. He continued as a board member after moving on to the Philippines.

Before coming to the CSCC, Fr. Desautels served as General Secretary of Unda, the international Catholic association for radio and television. After leaving London, he became General Secretary in the Office of Social Communication of the Federation of Asian Bishops' Conferences, a position he held from 1985 until his retirement in 1995. Even then he continued working as spiritual counselor at the Xavier School and as parish priest at Mary the Queen Parish in Manila until his death.

Fr. Desautels' career mirrored the Catholic Church's activities in communication, particularly in Asia, but also in Europe. Beginning in education, he came to communication through the founding of an educational broadcasting system in Vietnam. From there he moved into various administrative and fund

raising roles, supporting communication work and, with the CSCC, communication research in the service of the Church.

The son of Joseph Desautels and Marie Marchale, Fr. Desautels was born in 1914 in Montreal, Canada where, after earning an A.B. (Literature) from the College Sainte Marie, he entered the Society of Jesus in 1932. Assigned by his Jesuit superiors to the Chinese Missions, he studied and worked in Beijing, Tangshan, and Shanghai. He was ordained a priest in Shanghai in 1945. Fr. Desautels returned to Canada for further study; at the end of that time he was named superior of the Jesuit language school in Beijing in 1948, but was unable to return to China after the revolutionary government expelled foreigners.

At the request of the Jesuit Superior General, Fr. Desautels re-opened the language school, locating it in Manila. He worked there with seminarians until 1955 when he founded the Xavier School for Chinese Catholics in Manila. He stayed at the Xavier school for 12 years, serving as vice-rector, rector, and principal.

In 1967 he left Manila to become founding director of the Alexandre de Rhodes Educational TV and AV Centre in Saigon, Vietnam, a post he held until 1972. Turning his attention to communication work and administration, in the next few years he served as executive secretary of the Jesuit Communication group in Asia, assistant general secretary of Unda in Asia, and overseas program consultant to Radio Veritas Asia, a Catholic broadcasting group. In this latter capacity, he helped to restart the station.

In 1975 he left Manila and Asia for Brussels where he took up duties as General Secretary of Unda Worldwide, a position in which he worked with international church offices to promote and support Catholic communication efforts. When he returned to Manila in 1985 to work with the Federation of Asian Bishops' Conferences, he led Radio Veritas through a transition from a combined operation in which Radio Veritas offered programming for both the Philippines and Asia to one which saw the station split into Radio Veritas Philippines and Radio Veritas Asia. While the former became independent, the latter is still managed by the Federation of Asian Bishops' Conferences.

Paul Kenney, S.J., a colleague at the CSCC in London, remembers how Fr. Desautels combined vision with the necessary shrewdness to put that vision into practice. Fr. Kenney notes that he possessed "a good sense of humor, a warm down-to-earth friendliness, and a masterful command of details under one simple grasp of what really mattered." He also remem-

bers the simple things that endeared Fr. Desautels to his co-workers: "He was also a great cook, who could make a splendid soup with an unrepeatable taste. We would ask him how he seasoned it. He could never say, since he cooked by taste."

In all of his work and personal interactions, Fr. Desautels maintained that wonderful humor and deep respect for others. Maria Way, a former manager at CSCC London, writes, "I had the pleasure of meeting Jean Desautels sometime during the mid-eighties when I joined the Centre for the Study of Communication and Culture. That he died of a heart condition is, perhaps, apt. He was a man of great heart, one of the most charming people I have ever met. Intelligent, sharp, loveable, but, above all, great fun to be with. Although I have seen him little in recent years, I will miss him deeply."

The fact that some 6,000 people turned out for his funeral on August 6 bears eloquent testimony to his personal, priestly, and professional qualities.

—Paul A. Soukup, S.J.

## Notices

### *Media and Religion follow-up*

Since the publication of Volume 21, #2 of *Communication Research Trends*, we have received information about a number of additional resources.

*Journal of Media and Religion*. A new publication, with Volume 1, #1 recently issued, this journal is edited by Daniel A. Stout and Judith M. Buddenbaum and published by Lawrence Erlbaum Associates. Subscriptions: Journal Subscription Department, Lawrence Erlbaum Associates, Inc., 10 Industrial Avenue, Mahwah, NJ 07430-2262. [www.erlbaum.com](http://www.erlbaum.com).

*Media and Religion Bulletin*. Published by the Religion and Media Interest Group of the Association for Education in Journalism and Mass Communication. For more information, contact the chair, Kyle Huchins, Christian Institute of the West, [khuchins@aboutchristiancollege.org](mailto:khuchins@aboutchristiancollege.org). The Association for Education in Journalism and Mass Communication web site is [www.ajmc.org](http://www.ajmc.org).

*Religion in the News*. Published by The Leonard E. Greenberg Center for the Study of Religion in Public

Life, Trinity College, 300 Summit Street, Hartford, CT 06106.

The Religion Newswriters Association is "a non-profit association founded in 1949 to advance the professional standards of religion reporting in the secular media." It currently lists over 240 members. For more information, see its website [www.religionwriters.com](http://www.religionwriters.com) or send an e-mail to [info@religionwriters.com](mailto:info@religionwriters.com).

Block, E. (2000). The media and religion: A decade of print and electronic publications. *Communications Booknotes Quarterly*, 31(1), 5-16. An annotated bibliographic survey.

*Walter J. Ong, S.J.*

Walter J. Ong, S.J., a wide-ranging scholar whose works often address communication issues (and a contributor to *Communication Research Trends*), will celebrate his 90th birthday on November 30, 2002. In honor of that birthday, the four volumes of his essays published under the title of *Faith and Contexts* (edited by Thomas J. Farrell and Paul A. Soukup, S.J.) will be available at a reduced price (\$25 each). Interested readers will find details in the November 2002 edition of PMLA [Publications of the Modern Language Association].

