

HEALTH, PREVENTION AND TELEVISION:
WHAT VIEWERS SEE AND SAY

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INTRODUCTION

Aging is a process that starts with birth and continues throughout life. The different stages of the life cycle are roles that are learned from the numerous images about aging to which we are exposed during our lifetimes. One of the most pervasive suppliers of such images is the world of television.

Television is the mainstream of our popular culture. It presents stable and vivid images of many different facets of life and society, including the life cycle. Television presents a common view of the world -- one that enters the lives of practically all Americans for several hours each day. It enters the American home with little deviation or selectivity for an average of 30 hours each week; children and older folks watch somewhat more while teenagers watch somewhat less. Prime-time network drama makes up the bulk of this viewing and has become our nation's most common learning environment.

The world of television is a world created primarily to serve the function of attracting viewers for commercials. It is a synthetic world in which every character, prop, theme, locale, action, character, etc. is manufactured to attract the largest number of viewers at the least possible cost. The world of television is ruled by the principle

of cost per thousand -- how much money it costs to attract a thousand viewers. Moreover, not every viewer counts the same; the primary goal of prime time television is to attract viewers between 18 and 49 -- those in the prime earning and spending years of life.

The world of television may thus be thought of as a highly controlled assembly-line product. It's people do not live or die but are created or destroyed to tell a story. The message of all stories emerges from the aggregate patterns of casting, characterization, and fate. Moreover, every dramatic program is structured to make its casting seem natural -- but casting has a message all of its own.

Roles are created in direct relation to usefulness in the world of television. The most numerous are those for whom the world has more use -- more jobs, adventure, sex, power, and other opportunities and life chances. These values are distributed as most resources are distributed -- according to status and power. Dominant social groups tend to be over-represented and over-endowed not only absolutely but even in relation to their numbers in the real population. Minorities are defined as having less than their proportionate share of values and resources. In the world of television drama this means less usefulness and opportunities, fewer and more stereotyped roles.

Under-representation means restricted scope of action, stereotyped roles, diminished life chances, and undervaluation ranging from relative neglect to symbolic annihilation.

I do not mean to imply that faithful proportional representation of reality is necessarily fair or just. Artistic and dramatic functions require selection, amplification, and invention, all of which

may deviate from what the census reports or what independent experience reflects. Reality provides a standard by which the nature and extent of the deviations can be measured. The important question is not so much whether there are deviations as what kind exist and with what consequences for thinking, action, and policy.

This paper will examine and discuss some of the things television tells us about age roles, especially what it means to be and/or become old. It will look at how health and aging are portrayed and examine the relationship between television viewing and viewer conceptions relating to some of these issues.

LITERATURE REVIEW

The most pervasive finding of research¹ on the image of the elderly on television has been their gross under-representation. In addition to under-representation, many studies have revealed that characterizations of the elderly are often misleading and inaccurate. Although the Grey Panther's "Media Watch" is not "academic" research, this group nevertheless provides useful information by monitoring the way senior citizens are presented on television. According to Lydia Braggar, chairperson of "Media Watch," old people are depicted as "ugly, toothless, sexless, incontinent, senile, confused and helpless ... Old age has been so negatively stereotyped that it has become something to dread and feel threatened by" (O'Hallaren, 1977). Similarly, Carmichael (1976) has noted that the mass media presents older people as "slow, less intelligent, decrepit, sick, sex-less,

ugly, and senile." A study by Peterson (1973) of 30 half-hour segments randomly sampled by day, time-slot, and network during one week of broadcasting, however, revealed that the elderly were generally portrayed in proportion to their representation and that the image of the elderly was not entirely negative. She found that older people were portrayed as active (93 percent), independent (82 percent), and in good health (82 percent).

The under-representation of older people on television has been noted by several other researchers. Northcott (1975) analyzed evening (7 - 10 pm) dramatic programs with modern settings and found that characters over 64 accounted for only 7 out of 464 characters (1.5 percent). Moreover, five of these seven characters played minor roles. Similarly Greenberg et al. (1980, 1980a) found that characters over 65 made up only about 3 percent of the major characters in three yearly samples of prime-time network dramatic programming.

Over the past 12 years, my colleagues and I (Cultural Indicators Project) have examined the image of the elderly in week long samples of prime-time and weekend-daytime network television drama. This research revealed that from 1969 - 1978 characters over 65 made up only 2.3 percent of the prime-time population and only 1.4 percent of the weekend-daytime population (Gerbner et al., 1980a). Aronoff (1974) studied 2,741 major characters appearing in programs analyzed as part of the Cultural Indicators Project between 1969 and 1971. He found that the elderly comprised only 4.9 percent of the characters in non-cartoon network drama. Moreover, there were about the same number of elderly men and women. Aronoff also found that the chances of male

villainy increased with age, as did their rate of failure. Older female characters failed more often than they succeeded. "In a world of generally positive portrayals and happy endings, only 40 percent of older male and even fewer older female characters were presented as successful, happy, and good."

Some of my previous analyses of the Cultural Indicators data base have also focused upon aging. One study (Signorielli, 1974) revealed that the elderly made up only 5 percent of the sample of prime-time major characters in non-cartoon programs aired between 1969 and 1972. Another, more extensive, analysis of this data base (Signorielli, 1975) revealed that age was one of three important dimensions of characterization. Age also was related to personality traits of characters in that young characters (especially children and adolescents) were usually portrayed with positive personality traits while older characters had more negative traits. This analysis also revealed that older males were usually presented as "ineffectual" and that older females were the most likely characters to be victims of violence.

Other findings about the way the elderly are presented on television often comes from research whose main focus is not the elderly. For example, Mildred Downing's (1974) analysis of daytime serials revealed that female characters were younger than male characters and had a greater deterioration of occupational status as they grew older. Downing concluded that, "Still, the mature woman receives better representation in the daytime serial than on most other types of television programs."

METHODOLOGY

The research reported in this discussion was conducted as part of Cultural Indicators, an ongoing research project that has been examining trends in television content and conceptions of social reality since 1969 (Gerbner et al., 1978, 1979, 1980b). The Cultural Indicators design consists of two inter-related procedures: (1) message system analysis -- the annual content analysis of prime-time and weekend-daytime network television drama and (2) cultivation analysis -- determining the conceptions of social reality that television viewing tends to cultivate in different groups of viewers. ³

This study uses data from annual content analyses that are generated by pairs of highly trained observers. These data isolate the gross, unambiguous, and commonly understood patterns of portrayal; they do not reflect what any particular individual viewer might see on any given evening, but rather what large communities absorb over long periods of time.

The sample includes all dramatic prime-time (8 to 11 PM EST) programs aired on ABC, CBS, and NBC during one week in the fall of each year from 1969 - 1979, plus three samples from the spring of 1975, 1976 and 1981. ⁴ Dramatic programs include television plays, movies shown on television, cartoons with a fictional story line, as well as situation comedies and crime-adventure shows. Variety programs, news and information and sports programs broadcast during the sample week

time parameters are not included. This twelve year (14 sample weeks) sample includes 878 programs, 14,037 speaking characters, and 2,796 major characters (those who play roles essential to the story).

Each program in this sample was subjected to an extensive recording instrument that examined many different aspects of programming and characterization.⁵ This analysis focuses upon some of the data collected for major characters and, in certain analyses, all speaking characters. The specific content items used in this analysis include category schemes for social age,⁶ chronological age, sex, race, character type ('good'-'bad'), success, role (comic-serious), committing violence and victimization and a number of items relating to health and well-being.⁷

Data from each sample were subjected to an extensive reliability analysis to insure that the observations reflect properties of the material under investigation rather than instrument ambiguity or observer bias. Reliability was tested by having each content item in the instrument independently coded by two pairs of trained monitors. (The final data set consists of a random selection from one of these two codings for each program.) An agreement coefficient was then calculated for each item.⁸ Yearly coefficients range from .95 for sex to .66 for Character Type. The yearly coefficients for social age averaged .70. This report also discusses some of our findings originally presented in a number of different articles.

RESULTS AND DISCUSSION

Age is a strong determinant of who appears most and gains most on television. Table 1 shows the age distribution in real life and in the world of prime-time network dramatic television. In contrast to the distribution of age groups in the American population, the television curve bulges in the middle years and grossly under-represents both young and older people. More than half of television's dramatic population is between 25 and 45. Individuals under 19, who number about a third of the U.S. population, make up only a tenth of the fictional population. Those over 65, comprising about 11 percent of the U.S. population, make up only 2.3 percent of the fictional world. Rather strikingly, this pattern of over- and under- representation seems to reflect the profile of expendable consumer income by age. Television is thus populated by those to whom its programs, and especially its commercials, are pitched -- the group the industry would call the "prime demographic market."

In the world of prime-time drama men outnumber women by three to one. This finding has profound consequences for all that happens in that world. While women actually outnumber men among characters in their early twenties, as they grow older their numbers fall to four or five times below the number of men and their usefulness declines.

Table 2 gives the percent of men and women in each age group in the U.S. and on television. The age distribution of women, compared to that of men, favors young girls and women under 30. While men are most concentrated, with a third of their total number, in the 20 to 29

age group, men are most concentrated, also with a third of their numbers in the 30 to 40 age bracket. The character population is structured to provide a relative abundance of younger women for older men, but no such abundance of younger men for older women. Men age slower and enjoy life longer. Television perpetuates an inequitable and unfair -- if conventional -- pattern. The distribution of age roles by race, as well as gender (Table 2) also reveals the value structure of the symbolic world. Again, the age distribution of both white and non-white men and women bulge in the middle. But, while white men dominate the age of dramatic authority between 35 and 50, non-white men are concentrated between 25 and 40. Non-white men age as women, especially white women do, not as white men do. Finally, non-white women age even slower than their white counterparts -- about half of all non-white women are between 20 and 34.

Nevertheless, even though women on television are younger than the men, among major characters the women "age" much faster. As women age, they are cast in roles with fewer romantic possibilities. A comparison of the chronological age and social (role-related) age of prime time major characters reveals that as early as the teen years, the percentage of female characters (45.2 percent) assigned to the older social and dramatic category of young adult is greater than the percentage of males of the same age (36.7 percent) assigned to such roles. In their twenties only 28.2 percent of the men, but 36.9 percent of the women are cast as settled adults (the rest, of course, are young adults). Among characters between 50 and 64, 11.3 percent of the men and 14.7 percent of the women are cast as old characters.

Among characters 65 and older, 23.3 percent of the men still play settled adult roles and 76.7 percent are cast as old, but over 90 percent of the women of the same chronological age are cast as old.

Characterizations of major characters in prime-time drama also vary according to social age roles. On Table 3 we find that the evaluation of characters as "good" or "bad" is related to these roles: as men age, proportionately more are portrayed as "bad." For females, more young girls and older women are portrayed as "bad" than are young or middle-aged women. An obvious and important difference is that proportionately fewer older characters are "good."

Age-related chances for success are also presented on Table 4. The percent of men in each age role who are successful is about the same. As women age, however, the percent who are successful is similar for girls, young and middle-aged women, but drops to 17 percent for older women. In fact, more older women are unsuccessful than are successful -- something not seen for any other group. Casting a character in a comic, serious, or mixed role is also related to age. As Table 3 shows, the elderly, especially elderly men, are less likely to portray serious roles than are characters in the younger age-roles. Moreover, older men are much more likely than younger men to be cast in a comic role.

On television, older characters, especially older women are more likely to be portrayed as formerly married or widowed than as married. They are also quite likely to have children but are considerably less likely to be involved in a romantic relationship. As is true of women of all ages, a large percentage of older women are presented as not

working -- 29 percent are unemployed, 14 percent could not be coded on this item, and 14 percent are retired. While young and middle-aged men are usually shown working, (only 17 percent of the young men and 8 percent of the middle-aged men could not be coded on occupation), older men are presented somewhat differently -- only 9 percent could not be coded on occupation, 7 percent were unemployed and 20 percent were retired. Less than 1 percent of the middle-aged men were retired.

The world of television is one that is dominated by violence and while characters of all ages are likely to take part in the violence (see Table 4) the patterns of involvement for older characters are somewhat different from those of younger characters. Older men and especially old women are less likely to be involved in violence, but when involved old men are the only group who are more likely to commit violence than be a victim of it and old women are six times as likely to be hurt or killed than to hurt or kill others. Examination of who kills or is killed reveals that old men, like men of all ages, are more likely to kill than be killed; old women, however, are only the victims of lethal violence -- they never kill anyone else.

Despite all the mayhem, the characters on television rarely are in need of medical help. Table 5 reveals that characters of all ages are practically never physically ill -- overall, only 8 percent are so categorized. Even older characters exhibit less physical illness than one would expect -- only 10 percent of the older men and 13 percent of the older women are seen as having an illness that requires some medically-related treatment. Nevertheless, doctors and nurses abound on these programs -- the typical viewer of prime time programs sees

about 12 doctors and 6 nurses each week, including 3 doctors and 1 nurse in major roles. Very few characters are mentally ill and practically none have any physical handicaps. Moreover, characters, including the elderly, almost always are ambulatory and rarely wear glasses -- only one in five older men and one in four older women wear glasses.

Table 5 also shows that older characters do smoke somewhat more than younger characters -- 14 percent of the older men and 1 in 5 older women smoke. Television characters, especially in the settled adult group, are also quite likely to be seen having a drink, but very few are shown as alcoholics. Interestingly, proportionately more older characters than those in any other age group are portrayed as alcoholics.

In regard to nutrition on prime-time television, a pilot study conducted by my colleagues and I in 1979⁹ on a week long sample of prime-time dramatic programming, revealed that eating and/or drinking occur about 10 times each hour. Three-quarters of all dramatic characters, or some 15 each night, eat, drink, or talk about it, often more than once. Prime-time nutrition, however, is anything but balanced or relaxed: grabbing a snack (39 percent of all eating-drinking episodes) is virtually as frequent as breakfast, lunch, and dinner combined (42 percent). In episodes involving drinking, the most prevalent beverages are alcoholic. Coffee and tea are next. When eating and drinking occur simultaneously, more than half of the episodes are a meal with coffee, tea or alcohol (Gerbner et al., 1982b).

Our analysis of commercials (Gerbner et al., 1981) on prime-time and weekend-daytime programs revealed that food advertising accounts for more than a quarter of these commercials. Furthermore food-related activities (including mention of food or drink) occurred in over 40 percent of them. Sweets, snacks, and non-nutritious ("junk") foods made up nearly half of food commercials; nutritional appeals were noted in only 9 percent and stressed in another 7 percent of food commercials.

Our pilot study also revealed that obesity, a problem that plagues from 25 to 45 percent of the American population, depending on the estimate, claims few victims on television. We found fewer than 6 percent of all males and 2 percent of all females (none of them leading characters) obese.

Overall, the most prevalent image of the older adult on television is one of invisibility - their small numbers and considerable under-representation greatly restrict the types of roles in which they will be seen. The men and women are also seen quite differently. The men, with a greater propensity to commit violence, emerge as considerably more powerful than the women. Older women are presented in an especially negative way in that they are the only group who are more likely to be unsuccessful than successful and when involved in violence are much more likely to be hurt than to hurt others.

In regard to health issues, although the basic image is one of generally healthy people, older characters are a little more likely to be ill than younger characters. Also in areas reflecting good

health-related habits (smoking and drinking), older people are presented in a less favorable light -- they are the group who are most likely to be alcoholics and smokers.

Isolating the image of older people on television is just one part of the story. How do these images affect viewers -- what are the lessons viewers derive from television about growing old and being old in our society? What are the health implications of exposure to these messages embedded in our daily television fare? These are the questions our cultivation analyses attempt to answer.

A cultivation analysis on data from the National Council on Aging's "Myth and Reality of Aging" survey (conducted by Louis Harris and Associates in 1974) provides some answers. In regard to the first question, conceptions about aging, we constructed an index from the responses to statements asserting the number, the health, and the longevity of older people are declining. A high score on this index reflects a generalized belief that old people represent a diminishing rather than growing segment of American society.

This analysis revealed a significant positive relationship between amount of television viewing and scores on this index. The more people, especially young people, watch television, the more they tend to perceive old people in generally negative and unfavorable terms. Heavy viewers believe significantly more than light viewers that old people are a vanishing breed. The correlation of .10 ($p < .001$) is not reduced by controls for education, income, sex or age and it is much stronger for younger people; the correlation is .20 for those under thirty.

Another analysis of a question in the NCOA survey relating to the mobility of both the respondent and older people also sheds some light about viewer perceptions of aging. Respondents were asked whether "walking or climbing stairs" was a very or somewhat serious problem for themselves and also for most people over 65. The first question (is mobility a problem for you?) showed a significant relationship, controlling for sex, age, education, race, income, and newspaper reading ($r = .15, p < .001$) between television viewing and responding that the respondent's mobility was a very or somewhat serious problem. This finding is not surprising in that those who are more likely to have these problems probably spend more time at home and are thus more likely to watch more television. ¹¹ Since respondents' perceptions of the problems those over 65 have walking and climbing stairs may be influenced by the state of their own mobility, the assessment of the respondent's mobility was used as a control in this analysis. As noted above, the general image of the elderly on television is one of basically good health -- very few older characters are physically or mentally ill, few wear glasses and even fewer have any problems with mobility. This analysis revealed that for those respondents whose own mobility was problematic there was a significant negative relationship between television viewing and responding that the mobility of those over 65 was a very or somewhat serious problem. That is, those who described themselves as having problems walking or climbing stairs, when they watched more television did not think that those over 65 had similar problems. This negative relationship also held up under controls for sex, age, education, race, income and

newspaper reading ($r = -.16$, $p < .001$). There was no relationship between television viewing and perceptions of the problems people over 65 have walking or climbing stairs for those respondents who did not have mobility problems. It may be that those who have problems walking or climbing stairs are much more sensitive to these issues and when watching television are more sensitive to how these issues are presented.

We thus find that while the invisibility of the older person on television serves to cultivate in viewers a sense that being old is negative (respondents believe that the elderly do not really exist and that people, especially women, get old rather early in life) television does not cultivate only inaccurate or negative images -- rather respondents who have problems walking and climbing stairs do not believe that mobility is a serious or very serious problem for most people over 65.

In regard to the second question, information about prevention and the health implications of exposure to television messages is scarce. We know that television tends to monopolize the cultural participation of the less educated, lower income groups. A study conducted by General Mills (1979) shows that these groups have the poorest health and nutritional opportunities and are the most in need of valid information about health. This study also found that, next to doctors, television was the most frequently cited source of health information and that those who did choose television (vs. those who did not) manifest a distinct profile. In most demographic groups (defined by sex, social class, and place of residence), those who chose

television programs were significantly more likely to be categorized as "complacent" (vs. "concerned") on health attitudes; as holding "old" (vs. "new") health values; as being a "non-exerciser" on physical fitness; and as being "poorly-informed" (vs. "well" or "somewhat-informed") in terms of health information.

These data cannot support the argument that television contributes to poor health routines and lack of awareness of health information (although they are consistent with such a notion). But they do suggest that those who credit television as a main source of information, even with other things held constant, are not among the more health-minded segments of the population.

Data from a 1979 study conducted by the Roper Organization for Virginia Slims (Gerbner et al., 1982b), reveals that those who watch more television, other things held constant, are more likely to be complacent about eating, drinking, and exercise. While this association holds up within most subgroups, there are interesting exceptions which may be explained by a process we call "mainstreaming" (Gerbner et al., 1980a). "Mainstreaming" implies that some differences deriving from other factors may be reduced or even eliminated among those who watch more television (heavy viewers). Groups who share a relative commonality of outlooks cultivated by television (the "mainstream" view) will often show weak or no association between amount of viewing and a given perspective. But strong relationships may be found for those groups whose lighter viewers do not share that outlook. Thus, cultivation may often imply a convergence into a more homogeneous "mainstream," rather than absolute, across-the-board increments.

For example, in regard to diet and nutrition, a "mainstreaming" pattern is evident for different age groups. There is virtually no relationship between amount of viewing and being unconcerned about diet and nutrition for older people: older people are more likely to be unconcerned regardless of viewing; they are already "in" the "mainstream." Younger and middle-aged respondents, on the other hand, show evidence of the cultivation of nutritional complacency. The farther away from the mainstream, the stronger the cultivation.

To conclude, television viewing is deeply integrated into different styles of life, with powerful implications for health practices. A variety of findings, though preliminary and often indirect, lend credence to the notion that television may have a considerable impact upon the public's images, knowledge, and behaviors. Television programs are a frequently-cited source of health information; those who choose them, and/or heavier viewers, seem relatively neglectful and complacent about their physical well-being, are less informed about health and exercise less. Heavy viewing also goes with getting less satisfaction from one's health and high confidence in the medical community. In addition, the very act of watching television may generate behaviors and habits with clear health implications in the areas of smoking, eating, and drinking.

With regard to health-related program and commercial content, the portrayals of illness, doctors, nutrition, obesity, driving safety, smoking and drinking reveal a serious conflict with realistic guidelines for health and medicine. Research on the contributions of

these portrayals to specific conceptions of health and medicine is scarce. But the pattern of findings, including the pilot study conducted by my colleagues and I, indicates that television viewing is associated with a convergence of the heavier viewers upon paradoxical and disjointed "mainstream" conceptions and practices.

The cultivation of ignorance and neglect, especially among the otherwise relatively enlightened viewers, coupled with an unrealistic belief in the magic of medicine, is likely to perpetuate unhealthy lifestyles, hurt patients and health professionals, and frustrate efforts at health education. If culturally sustained health hazards are the new frontier in health promotion and disease prevention, there is a need for greater mobilization of effort and resources in a central sector of that frontier. The first step toward such mobilization is the fuller, broader, and more sustained study of the messages television conveys about health and a refinement of their contributions to the health conceptions and behaviors of various groups of viewers.

REFERENCE NOTES

1. A review of communications research related to aging may be found in Rubin, 1982.
2. This report updates and expands upon work originally reported in Gerbner et al., 1979.
3. This research has focused upon many different topics including political orientations (Gerbner et al., 1982a); violence and power (Gerbner et al., 1980b); marital status (Signorielli, 1982); sex-roles (Gerbner and Signorielli, 1979); and occupational portrayals (Signorielli, 1979).
4. The sample for the 1980-81 television season was videotaped and analyzed in the spring of 1981 because of a strike by the Screen Actors Guild.
5. A complete description of this methodology, including reliability measures, may be found in Gerbner et al., 1978, 1979, 1980b and 1980c.
6. Social age is a functional category scheme used to characterize life cycle as well as dramatic role. The categories included in this item are: children/adolescents, young adults (typically the age between adolescence and a more settled vocational and personal life and responsibilities), settled adults, and older adults (elderly).
7. Many of these items were not added to the instrument until 1978.
8. The assessment of reliability consists of the calculation of an agreement coefficient for each content item. Five computational formulae are used; their variations depend upon the scale type of the particular variable being analyzed. For the derivation of the formulae and a discussion of their properties see, Krippendorff, 1970 and 1980. These coefficients range from +1.00 to -1.00 where +1.00 indicates perfect agreement and .00 is agreement due solely to chance. A coefficient of .50 indicates that performance is 50 percent above the level expected by chance. Acceptable levels of reliability are defined as follows: items with agreement coefficients of .8 or above are accepted unconditionally, items with coefficients between .6 and .8 are

accepted conditionally, while items whose coefficients fall between .5 and .6 are used with extreme caution. All items used in this analysis meet these standards.

9. We conducted a pilot study, under the support of the National Institute of Mental Health, to investigate certain aspects of television's messages about health and their possible impact on viewers. This pilot study utilized the cumulative Cultural Indicators data bank and included a special study of one week's (1979 sample) network dramatic programming analyzing portrayals of selected aspects of medicine, illness, nutrition, drinking, smoking, body weight, and safety. This study is reported in Gerbner et al., 1982b.

10. Factor analysis revealed that these three statements measured a single dimension. The variables produce a moderate but acceptable alpha of .56 and more than adequately pass a series of validity checks (Gonzalez, 1979).

11. Data from other analyses also reveals that television viewing is also related to smoking and drinking. Analysis of data in the 1977 and 1978 NORC General Social Surveys revealed that non-smokers average 2.65 hours of viewing a day while cigarette smokers average 3.01 hours of television each day. Television viewing is, however, negatively associated with drinking alcoholic beverages for respondents who are white, between 18 and 19, college educated or in excellent health. (Gerbner et al., 1982b)

12. The data reported here are presented in more detail in Gerbner et al., 1982b.

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TABLE 1

Comparison of the Age Distribution
of TV Characters with the U.S. Census
(1969-1981)

	U.S.	PRIME-TIME	
	%	N	%
ALL CHARACTERS			
TOTAL	100.0	13700	100.0
UNDER 5 YEARS	7.2	31	0.2
FROM 5-9 YEARS	7.4	205	1.5
FROM 10-14 YEARS	8.1	436	3.2
FROM 15-19 YEARS	9.3	639	4.7
FROM 20-24 YEARS	9.4	970	7.1
FROM 25-29 YEARS	8.6	1886	13.8
FROM 30-34 YEARS	7.8	1866	13.6
FROM 35-39 YEARS	6.2	2119	15.5
FROM 40-44 YEARS	5.2	1706	12.5
FROM 45-49 YEARS	4.9	1521	11.1
FROM 50-54 YEARS	5.2	1069	7.8
FROM 55-59 YEARS	5.1	568	4.1
FROM 60-64 YEARS	4.5	374	2.7
FROM 65-69 YEARS	3.9	186	1.4
FROM 70-74 YEARS	3.0	83	0.6
FROM 75-79 YEARS	2.1	20	0.1
FROM 80-84 YEARS	1.3	9	0.1
85 YEARS AND OVER	1.0	12	0.1

TABLE 2

Age Distribution of Male and Female, White and Other Race
 Characters on Prime-Time Network Drama
 (1969-1981)

	ALL MEN		WHITE MEN		NON-WHITE MEN	
	U.S.	PRIME TIME	U.S.	PRIME TIME	U.S.	PRIME TIME
	N =	9908	8724	1172		
	%	%	%	%	%	%
UNDER 5 YEARS	7.6	0.1	7.1	0.1	10.2	0.5
FROM 5-9 YEARS	7.8	1.3	7.3	1.2	10.1	2.2
FROM 10-14 YEARS	8.5	2.8	8.1	2.3	10.4	6.0
FROM 15-19 YEARS	9.8	3.9	9.4	3.5	11.5	7.0
FROM 20-24 YEARS	9.7	4.8	9.5	4.6	10.8	5.7
FROM 25-29 YEARS	8.8	11.1	8.7	10.5	9.3	15.6
FROM 30-34 YEARS	7.9	13.7	8.0	13.0	7.5	18.9
FROM 35-39 YEARS	6.2	16.9	6.4	16.9	5.6	16.8
FROM 40-44 YEARS	5.2	14.2	5.3	14.8	4.7	9.8
FROM 45-49 YEARS	4.9	12.8	5.1	13.3	4.1	8.4
FROM 50-54 YEARS	5.1	9.0	5.4	9.6	3.8	3.9
FROM 55-59 YEARS	5.0	4.5	5.3	4.9	3.4	1.5
FROM 60-64 YEARS	4.2	2.9	4.6	3.1	2.7	1.4
FROM 65-69 YEARS	3.5	1.3	3.8	1.3	2.3	1.0
FROM 70-74 YEARS	2.6	0.6	2.8	0.6	1.6	0.9
FROM 75-79 YEARS	1.7	0.1	1.8	0.1	1.1	0.3
FROM 80-84 YEARS	0.9	0.0	1.0	0.0	0.5	0.0
85 YEARS AND OVER	0.6	0.1	0.7	0.1	0.4	0.1

	ALL WOMEN		WHITE WOMEN		NON-WHITE WOMEN	
	U.S.	PRIME TIME	U.S.	PRIME TIME	U.S.	PRIME TIME
	N =	3783	3380	396		
	%	%	%	%	%	%
UNDER 5 YEARS	6.9	0.3	6.4	0.3	9.3	0.0
FROM 5-9 YEARS	7.0	2.1	6.6	1.9	9.2	3.3
FROM 10-14 YEARS	7.7	4.1	7.3	4.1	9.5	4.3
FROM 15-19 YEARS	8.9	6.7	8.6	6.7	10.5	6.6
FROM 20-24 YEARS	9.1	13.2	8.9	13.2	10.3	12.9
FROM 25-29 YEARS	8.4	20.7	8.3	20.6	9.3	21.7
FROM 30-34 YEARS	7.6	13.5	7.6	13.3	7.8	15.2
FROM 35-39 YEARS	6.1	11.9	6.1	12.1	5.9	9.6
FROM 40-44 YEARS	5.1	8.0	5.1	8.0	5.0	7.6
FROM 45-49 YEARS	4.9	6.8	5.0	6.7	4.5	7.1
FROM 50-54 YEARS	5.2	4.8	5.4	4.9	4.3	4.5
FROM 55-59 YEARS	5.3	3.3	5.6	3.3	3.8	3.0
FROM 60-64 YEARS	4.7	2.3	5.0	2.4	3.1	1.8
FROM 65-69 YEARS	4.2	1.5	4.5	1.4	2.8	2.0
FROM 70-74 YEARS	3.4	0.6	3.7	0.6	2.0	0.5
FROM 75-79 YEARS	2.5	0.2	2.8	0.2	1.4	0.0
FROM 80-84 YEARS	1.6	0.1	1.8	0.1	0.8	0.0
85 YEARS AND OVER	1.3	0.0	1.5	0.0	0.6	0.0

TABLE 3

Evaluation of Major Characters
on Prime-Time Network Drama
(1969-1981)

	CHILDREN ADOLESCENTS		YOUNG ADULTS		SETTLED ADULTS		OLDER ADULTS		TOTAL	
	MEN	WOMEN	MEN	WOMEN	MEN	WOMEN	MEN	WOMEN	MEN	WOMEN
	%	%	%	%	%	%	%	%	%	%
N =	112	53	370	228	1382	495	70	23	1979	814
CHARACTER TYPE										
"GOOD"	57.1	52.8	57.8	60.5	55.8	61.8	44.3	47.8	55.7	60.6
MIXED	38.4	39.6	28.9	32.9	28.5	31.9	38.6	43.5	29.7	33.0
"BAD"	4.5	7.5	13.2	6.6	15.7	6.1	17.1	8.7	14.6	6.3
SUCCESS										
SUCCESSFUL	38.4	35.8	37.3	39.0	41.0	43.2	37.1	17.4	39.8	40.9
MIXED	49.1	50.9	43.0	46.5	39.0	44.0	40.0	47.8	40.7	45.1
UNSUCCESSFUL	12.5	13.2	19.7	14.5	19.9	12.5	22.9	34.8	19.4	13.9
ROLE										
LIGHT/COMIC	14.3	9.4	17.0	19.7	13.2	17.4	24.3	13.0	14.5	60.6
MIXED	28.6	43.4	24.3	23.7	17.6	25.9	22.9	39.1	19.8	33.0
SERIOUS	57.1	47.2	58.6	56.6	69.2	56.8	52.9	47.8	65.8	6.3

TABLE 4

Committing Violence and Victimization
of Major Characters
on Prime-Time Network Drama
(1969-1981)

	CHILDREN ADOLESCENTS		YOUNG ADULTS		SETTLED ADULTS		OLDER ADULTS		TOTAL	
	MEN	WOMEN	MEN	WOMEN	MEN	WOMEN	MEN	WOMEN	MEN	WOMEN
N =	112	53	370	228	1382	495	70	23	1979	814
	%	%	%	%	%	%	%	%	%	%
VIOLENCE BY VICTIMIZED	27.7	20.8	50.8	28.1	47.5	25.7	34.3	4.3	46.8	25.8
INVOLVED IN VIOLENCE	42.0	24.8	56.5	43.0	49.9	26.3	30.0	26.1	50.5	26.1
	46.4	35.8	63.2	48.7	59.8	36.2	45.7	26.1	59.6	40.0
VIOLENCE-VICTIM RATIO	-1.52	-1.18	-1.11	-1.53	-1.05	-1.02	+1.14	-6.00	-1.08	-1.22
	%	%	%	%	%	%	%	%	%	%
KILLER KILLED	2.7	1.9	13.2	3.9	11.7	3.6	8.6	0.0	11.6	3.4
INVOLVED IN KILLING	0.9	1.9	5.9	2.2	5.4	2.2	5.7	13.0	5.5	2.6
	3.6	1.9	15.9	6.1	14.3	5.3	12.9	13.0	14.2	5.5
KILLER-KILLED RATIO	+3.00	+1.00	+2.23	+1.8	+2.16	+1.64	+1.5	-0.0	+2.12	+1.33

TABLE 5

Health and Health-Related Behaviors
of Major Characters
on Prime-Time Network Drama
(1969-1981)

	CHILDREN ADOLESCENTS		YOUNG ADULTS		SETTLED ADULTS		OLDER ADULTS		TOTAL	
	MEN	WOMEN	MEN	WOMEN	MEN	WOMEN	MEN	WOMEN	MEN	WOMEN
N =	112	53	370	228	1382	495	70	23	1979	884
	%	%	%	%	%	%	%	%	%	%
HANDICAPPED PHYSICAL ILLNESS	3.6	1.9	2.7	1.3	2.2	1.0	4.3	4.3	2.4	1.4
MENTAL ILLNESS	9.8	9.4	9.2	7.9	7.3	7.3	10.0	13.0	7.9	8.2
N =	28	14	67	54	303	132	14	5	426	211
	%	%	%	%	%	%	%	%	%	%
SMOKES	0.0	0.0	6.0	3.7	12.2	2.3	14.3	20.0	10.8	2.8
DRINKS ALCOHOLIC	7.1	0.0	20.9	24.1	42.2	45.5	35.7	20.0	35.9	35.5
	0.0	0.0	0.0	0.0	2.0	0.0	7.1	20.0	1.6	0.5
RESTRICTED MOBILITY	3.6	0.0	4.5	0.0	1.0	0.0	0.0	0.0	1.6	0.0
N =	16	7	48	36	220	90	11	4	306	140
	%	%	%	%	%	%	%	%	%	%
SIGHT IMPAIRMENT	12.6	0.0	2.1	0.0	9.6	7.8	18.2	25.0	9.2	6.4