She-Coronavirus: How cartoonists reflected women health workers during the COVID-19 pandemic

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Abstract
Women account for 70% of healthcare workers, so their role has been – and still is – fundamental in addressing and managing the current pandemic event caused by the SARS-CoV-2 coronavirus. Far from being an opportunity to highlight the importance of women in the field, the healthcare crisis, together with lockdown policies and care responsibilities, have contributed to increase the gender gap. To study the depiction of women healthcare professionals, this paper analyses 401 cartoons on the COVID-19 pandemic that depict healthcare workers. Most represent doctors as men and nurses as women, in roles subordinate to men. The representation of women is also impacted by stereotypes that do not contribute to better reflect the roles and professional skills of women in the healthcare field today.

Keywords
Coronavirus, COVID-19, health crisis, doctors, gender gap, cartoons

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Introduction

The recent healthcare crisis caused by the COVID-19 pandemic has the world’s healthcare systems up against the ropes. Each country’s healthcare strengths and deficiencies are now out in the open. The role of women in this crisis that has often been compared by most politicians with a war (Guterres, 2020; Opillard et al., 2020) has been exceptionally important: the presence of women in hospitals and primary care facilities is predominant (Wenham et al., 2020), not only as nurses but also as doctors. Women account for 70% of workers in health and social sectors globally, according an analysis of 104 countries (Boniol et al., 2019). Even though men still hold most doctor positions in many regions of the world, this is not so in Europe and the Americas, where women represent 46% and 53% of doctors, respectively (Boniol et al., 2019). In Europe, many countries have a similar number of – or even more – women compared to men. In Denmark, women doctors are 51% of all doctors, in the Netherlands, they are 54%, in the Czech Republic, Portugal, and Spain, they represent 55%, 57% in Poland, 58% in Finland and the Slovak Republic, 63% in Slovenia, 69% in Lithuania, and the highest percentages of women doctors in Europe are found in Estonia and Latvia, where they represent up to 74% (OECD, 2019). Nursing has traditionally been a feminised profession, and women account for 86% of these positions in the Americas and 84% in Europe (Boniol et al., 2019).

In this sense, we could say that healthcare is largely in the hands of women who, thanks to their dedication and effort, have taken positions among the staff, even though management positions are still occupied by men (Bismark et al., 2015; Boylan et al., 2019), in an unequal work dichotomy that has been reported many times and is common in most labour sectors in which women are present (FitzSimons et al., 2018; Institute for Inclusion in the Legal Profession, 2020).

In a healthcare crisis like the current one, the gender gap widens. As stated by the United Nations entity responsible for gender equality and the empowerment of Women (UN Women, 2020), in the current pandemic ‘women are playing a key role, often disproportionate to men, in responding to the disease, as frontline healthcare workers, as well as care givers at home. Experience of other disease outbreaks shows that they have the highest risk to be infected’. In the United States, 73% of COVID-19 positive cases among healthcare workers were women (Centers for Disease Control and Prevention, 2020). One of them, Doctor Lorna Breen, emergency room director at a New York hospital, committed suicide after she recovered from the disease, faced with the pressure of seeing patients dying even before they were out of the ambulance. According to a recent meta-analysis, ‘physicians are an at-risk profession of suicide, with women particularly at risk’ (Dutheil et al., 2019).

But the gender gap among medical workers is not just about life-threatening events. Brubaker (2020) points out that the COVID-19 pandemic ‘has also highlighted systemic assumptions about women physicians that may cause unintentional disadvantage’. One of them, similar to other professions, is that women physicians are more devoted to family life, while male physicians are more focused on work. Thus, women have traditionally been encouraged to reduce work hours in order to dedicate time to domestic and care work. But when these adjustments are disproportionately seen only in women physicians,
'these actions stigmatise women physicians and derail career progression’ (Brubaker, 2020: 835). A recent study also showed that COVID-19 medical papers have had fewer women as first authors than was expected (Andersen et al., 2020).

Women physicians tend to be underrepresented in awards and recognition (Silver et al., 2017), as well as in the highest academic levels (Larson et al., 2019; Lautenberger and Dandar, 2020). This is also true for the depiction of the field in the media. In an analysis of the Australian press, Lupton and McLean (1998: 955) verified that only 12% of images and cartoons depicted women doctors, which proved that ‘the archetypal medical practitioner, therefore, as represented visually in the press, was male’. More recently, a research project that analysed the image of women scientists using 1134 photographs published in Spanish newspapers (González et al., 2017) showed that men appeared in 83% of the pictures, while women appeared only in 26%. When there was only one person in the picture, only in 17% of cases was that person a woman. The paper also revealed that women are used more than men as a resource or ‘decor’ in pictures that illustrate news but whose protagonists are not related to that news.

Therefore, women have less representation in science and medicine media coverage, and when they do get represented, it tends to be in stereotypical portrayals (Chimba and Kitzinger, 2010; Wood, 2011). Media images can become deeply rooted in society, showing the importance of providing more accurate depictions (Gill and Baker, 2021). Indeed, media framing of specific social groups can affect public perceptions and decision-making processes, as seen in other fields such as politics (Druckman, 2005; Haraldsson and Wångnerud, 2019).

Cartoons are an effective way to contribute to public opinion on the topics that most concern society. It can be argued that cartoons tend towards exaggeration and satire, but they generally reflect the general public opinion better (Domínguez and Mateu, 2014). In this sense, they provide frameworks for understanding and interpreting complex social events and situations (Abraham, 2009; Moreno-Tarin, Pina and Domínguez, 2021; Nwabueze et al., 2017). Currently, these representations can also be quickly and effectively disseminated over the internet, frequently becoming very persuasive memes, with great potential for media dispersal (Domínguez, 2015c). Cartoons are thus a necessary element for societies to understand the professionalism of women in the healthcare system, and to contribute to removing stereotypes that have little to do with reality.

This paper focuses on cartoonists’ coverage of the medical coronavirus crisis. Cartoons are a very useful tool to analyse social reality. Graphic humour is a very powerful way of conveying news, and portraying its most compelling and outstanding aspects to the public (Domínguez, 2014, 2015a, 2015b). Several studies show how public opinion is better captured in cartoons, especially in relation to particularly contested issues. Cartoons represent those debates better than other interpretive journalistic genres (Domínguez and Mateu, 2014; Domínguez et al., 2014; Forceville and Urios-Aparisi, 2009).

Our main hypothesis is that in the early period of the global coronavirus health crisis, cartoons overrepresented men physicians at the expense of women physicians. As we have seen, several studies have confirmed the underrepresentation of women scientists and doctors in news media pictures. Similarly, we propose that women doctors are
also less visible in cartoons, even during events like the current pandemic. We believe that the male doctor/female nurse association is still firmly established in the collective imagination, perpetuating stereotypical interpretation frameworks.

Therefore, we establish the following research questions (RQ):

1. Are women underrepresented in cartoons related to the COVID-19 pandemic that show healthcare workers?
2. Are they the main character in the cartoon or is their role subordinated to a male figure?
3. Is the representation of men and women stereotyped?

Sample and methods

To obtain the sample, we examined six image databases (Caglecartoons, Cartoonstock, Cartoonistgroup, Cartoonmovement, Toonpool, and USNews Politicalcartoons) over a period extending from March to June 2020, corresponding to the first months of the global pandemic, from the moment it was declared by the World Health Organization (2020, 11 March) to the gradual removal of the most severe restrictions on population movement (Han et al., 2020). In addition, a complementary massive search was performed in Google images using the same keywords and criteria. Finally, to complete the representation of countries like Spain – one of the most severely hit by the pandemic – cartoons in the main newspapers and magazines published online during the same period were also included. The keywords used in the search were ‘coronavirus’ and ‘COVID-19’, and only the results that showed healthcare workers were selected. Cartoons related to the coronavirus that showed researchers working on the vaccine were also included, because of their obvious proximity to the topic and because many of them showed medical staff members working on research. A preliminary sample of 412 cartoons was obtained. After removing eight repeated cartoons and three that showed no people (only non-gender-specific hands), the final sample included 401 cartoons.

The cartoons selected belong to cartoonists from 36 countries, some of which may be more strongly represented than others in the databases. This results in cartoons from some countries being under-represented in the sample. Even so, we consider it interesting to include the total number of cartoons obtained, since the aim of the analysis is not so much to detect differences between countries and cultures, but rather to detect similarities in the approach to gender in the sample as a whole. Nine groups were established for the analysis of the cartoons: (1) man physician (cartoons with one or several doctors), (2) woman physician (cartoons showing a woman as a doctor with no male companion), (3) men and women physicians (cartoons with at least one man and one woman, both of them doctors), (4) man healthcare worker (porters, nurses, ambulance drivers, etc.), (5) woman healthcare worker (nurses), (6) man physician and healthcare worker (cartoons where the doctor is accompanied by another non-doctor professional), (7) woman physician and healthcare worker (cartoons with a woman doctor accompanied by another non-doctor professional), (8) unknown sex healthcare workers (cartoons where the sex of the professionals cannot be identified, for instance because of protective medical clothing), and finally (9) healthcare workers in general (including several people
who can be doctors, porters, nurses and other representatives of the healthcare system, regardless of sex).

In the cartoons featuring women and men doctors, a secondary categorisation was used to analyse whether the role of women was more active or passive than that of men. To do this, women doctors were classified as ‘active’ when they were the ones delivering the text or carrying out the action in the cartoon, ‘equal’ if both were shown on equal terms, and ‘agentic’ when men were the ones speaking, giving orders, or carrying out actions while women simply stood silently by their side, appeared one step behind, followed orders, or said phrases traditionally attributed to women (cooking soup or commenting on the difficulty of carrying out a task, e.g.).

The distance between medical and assisting personnel is sometimes quite blurred. However, the characters were considered doctors when they showed some characteristic that is traditionally related to the profession, such as the ‘Dr’ label in their coat, the medical briefcase, a stethoscope (Campbell, 2001), or a head mirror (Rice, 2010), as well as other clothing aspects such as a tie or bowtie under their coat (men physicians), or their actions (they were, for instance, giving a diagnosis). We considered medical researchers all those who were represented in a laboratory or looking through a microscope, working on the creation of a vaccine. Conversely, for healthcare women or nurses, we looked at caregiving tasks, the fact that they were being supervised by medical personnel, or when the characters were wearing a red cross bonnet. Although it is not used anymore, these bonnets have traditionally identified the work of nurses. Regarding male personnel, in this group we have included the types of tasks performed by men healthcare professionals in the analyzed cartoons: nurses, but also porters, healthcare vehicle drivers, etc.

Similarly, when patients appeared in cartoons, they were classified in the following way: (1) men, (2) women, (3) both sexes, (4) non-gender-specific, and (5) non-human (cartoons where the patient is a flag, an animal, the statue of liberty, etc.).

Both researchers coded the entire sample. We tested the variables with independent intercoder reliability tests. Two independent researchers coded 10% of the sample (40 cartoons). Results were 0.70 and 0.75 for the gender of health care doctors and healthcare workers and 0.83 and 0.86 for the gender of the patients, substantial and almost perfect agreement according to Cohen’s kappa coefficient (Landis and Koch, 1977). The same two independent researchers coded 20% of cartoons (Syed and Nelson, 2015) in the category of men and women physicians (to verify the sub-coding of women’s role as ‘active’/‘equal’/’agentic’). Results were 0.78 and 0.73 that also represents a substantial agreement.

Results: The battle of the healthcare worker sexes in Coronavirus cartoons

The sample of 401 cartoons with medical workers related to the COVID-19 pandemic were created by cartoonists from 36 different countries, including the USA and Spain, two of the most severely hit by this healthcare crisis (Figure 1). The cartoonists in the sample are mostly men. Women were the authors of only 2.2% (n = 9) of the cartoons analysed.
Regarding the healthcare professionals in the cartoons of the sample, most show men (Figure 2), either as doctors or as other healthcare workers. From the 401 analysed cartoons, 167 show a male doctor as the protagonist, representing 41.6% of the sample, and 76 others show a group of male healthcare professionals, almost 19% of the total. These are the two most represented groups, and they contrast with other groups, like women doctors shown as the main characters. With only 19 cartoons, they represent 4.7% of the sample. Female healthcare workers (nurses), with 35 cartoons, represent 8.7% of the sample. We should also note that the doctor-assistant pair, where the doctor is a man and the assistant is a woman, appears in 24 cartoons, 5.9% of the sample, while the opposite case – female doctor and male assistant – is present in just 2 of them, 0.4%.

Finally, the number of images including patients together with professionals was also counted (Figure 3). Patients appear in 147 cartoons, 36.6% of the sample. These repeat the same dynamics, with mainly men being represented. More specifically, they appear in 109 cartoons, 74.1% of those including patients. In far fewer cartoons, 13 of them,
Figure 2. In COVID-19 cartoons including healthcare professionals, we can observe that male doctors are the most represented individuals. Categorization: MD (male doctor), MHP (male healthcare professional), M + F D (male and female doctor), FHP (female healthcare professional), Unknown (unidentifiable man or woman due to personal protective equipment), MD + HP (male doctor and healthcare professional), FD (female doctor), HP group (healthcare professionals as a team), FD + HP (female doctor with health professional). Source: Own data.

Figure 3. Men are also the most represented sex among patients in the analysed cartoons. Source: Own data.
(8.8%), patients are represented as animals or symbols (the statue of liberty, a donkey representing the US democratic party, etc.). In other 10 cartoons (6.8%) it is not possible to know whether the patient is male or female, because of the ventilator or because they are completely covered. Only 9 cartoons (6.1%) show a woman patient, and 8 (5.4%) include both men and women.

**Men and women physicians in Coronavirus cartoons**

Generally speaking, doctors are depicted helping COVID-19 patients at the hospital or in consultation in their private clinic. Doctors listen to the patients’ described symptoms and provide a diagnosis (Dave Granlund, USA). In this sense, they are shown as the voice of common sense, an authoritative voice that calms the patient and faces the general state of nervousness – or even hysteria – that comes with the pandemic (Bob Englehart, USA; Dave Grandlund, USA; Agarwal and Baker, USA). Doctors appear as heroes (Diana Bledsoe, USA), as great social benefactors, or arm-wrestling death (Angel Boligan, Cuba). The Costa Rican cartoonist Arcadio pictures one as Superman (‘a superdoctor’), as does US cartoonist Plante, and Chappatte draws a doctor before he enters a COVID CASES room, saying: ‘When I was a kid, I wanted to be a superhero’, and a nurse

![Figure 4. The cartoon on the left (Derkaoui, Morocco) shows a doctor as a soldier, presenting his ‘weapons’: A microscope and other laboratory equipment are depicted as a battleship, while a syringe represents a fighter plane. War terminology has been common during the pandemic, which might have contributed to the lack of visibility of women in healthcare crisis representations. The cartoon on the right (Oguz Gurel, Turkey) shows USA president Donald Trump dressed as a nurse, wearing a bonnet and high heels. Whenever he is dressed as a doctor, he is represented as a man; meanwhile, when he represents a nursing professional, he is characterised as a woman.](image-url)
who is coming in with him answers: ‘…And you became one!’ (Patrick Chappatte, Switzerland). Many cartoons show a middle-aged or elderly man, fat and with a receding hairline (or even bald) (Oguz Gurel, Turkey).

Other cartoonists depict doctors as soldiers, doing a military salute (Derkaoui, Morocco) (Figure 4), fighting a war compared to the first or second world wars, or the Vietnam war (Mike Luckovich, USA), or wielding a syringe as a weapon (Moro, Cuba). Similarly, COVID researchers searching for a vaccine are mostly men: they are often represented using a microscope (Oguz Gurel, Turkey; Sherif Arafa, Egypt; Vladimir Kazanevsky, Ukraine; Brian Fray, UK; Landry Banga, Cote d’Ivoire; Frank and Enest, USA; Michael Ramirez, USA): Nikola Listes (Croatia), in a cartoon titled ‘Covid19 Laboratory’, shows five senior researchers with their microscopes and test tubes, and Abdelghani Dahdouh reproduces a similar scene (Morocco). Emad Hajjaj (Jordan) draws Rodin’s thinker with a microscope. Sometimes a sports metaphor is used, with the coronavirus as a ball on a football field, in front of the goal: these always show men (Oguz Gurel, Turkey). Healthcare professionals are also drawn playing baseball. One example of this is a cartoon by Pat Bagley (USA), showing an outfielder overwhelmed by the number of virus/balls he needs to catch.

Several cartoons show US President Donald Trump dressed as a doctor (Quack Prez, USA; Rick McKee, USA, Feggo, USA), performing his extravagant therapies against the pandemic. ‘First, I’m going to inject your lungs with disinfectant, then hit your body on the inside with ultraviolet light…’, he tells a patient, characterised as Uncle Sam (Rick McKee, USA). Turkish cartoonist Oguz Gurel depicts him dressed as a nurse, with particularly hairy legs and a syringe in hand, under the title ‘Nurse Trump’ (Figure 4). On a different note, Marian Kamensky (Slovakia) draws four doctors laughing at Trump’s bragging. Other public political and economic figures are also transformed into doctors. Some examples are Bill Gates (Petar Pismestrovic, Serbia); French President Emmanuel Macron (Placide, France); US senior Presidential Adviser, Jared Kushner (Adam Zyglis, USA; Dave Granlund, USA) or the Republican analyst Kellyanne Conway, characterised as a nurse assisting ‘Doctor Trump’ (Jeff Danzinger, USA). In all of the cartoons of the considered countries, no woman is a figure of scientific authority, unlike Dr Anthony Fauci in North American cartoons (Plante, USA; Dave Granlund, USA). Fauci is depicted wearing a white coat and much taller than President Trump, who is caricatured as a little person (David Horsey, USA).

In contrast, in the analysed sample, women doctors are the main characters in only 19 cartoons, barely 4.7% of the total. In these cases, women are depicted taking care of a patient (Mark Lynch, Australia; Mike Flanagan, USA) or desperate because of the lack of medical equipment (Signe Wilkinson, USA; Mike Luckovich, USA). In a cartoon by Jon Carter (USA), a woman doctor is shown during a telehealth consultation, and the patient says: ‘Boy, Dr Perkins, are you a “site” for sore eyes!’ Drew Sheneman (USA) draws a woman doctor on a pedestal, with a plaque reading ‘Heroes of the pandemic’, accompanied by a courier and a groceries vendor. This is one of the few examples in which is shown the great work carried out by women.

Women and men doctors are drawn together in 39 cartoons, 9.7% of the sample. In this category, female doctors only adopted an active role in 4 cartoons and an equal role in 15 cartoons, while their position was agentic in 20 cartoons. In these examples, women
primarily play a passive role, while a man doctor asks questions, answers the doubts of the patient (Bob Englehart, USA; Ann Tenaes, USA, Signe Wilkinson, USA), or resolves any complex issue (David Fitzsimmons, USA; Harley Schwadron, USA; Gaey Varvel, USA; Signe Wilkinson, USA). The British cartoonist Mike Flanagan draws two doctors, a man and a woman, speaking to each other: ‘Dr Cohen, I hear you’ve found the vaccine’, to which she answers with a smile: ‘Yes, it’s chicken soup’. In another cartoon by Ellie Black (USA), we see a researcher, test tube in hand and looking bored, telling a colleague: ‘I’m trying to find the vaccine, but it’s so hard to create right now’.

Women often also appear in the background, behind a male figure (Walt Handelsman, USA; Nick Andersen, USA), even asking for more medical equipment or personnel (David Horsey, USA). When medical teams are shown, women are always a minority (Jeff Koterba, USA; Arend van Dam, the Netherlands). Alfredo Martirena (Cuba) shows a group of doctors in a race to find a vaccine, and the winner of the race is a man, followed by a woman. The race for the vaccine seems to be a research project led by men, rather than women (Paul Wood, UK).

The Iwo Jima monument appears as a symbol in several cartoons (Mike Lukovich, USA) where doctors erect a syringe instead of a flag (Tjeerd Royaards, the Netherlands; David Fitzsimmons, USA). In these pictures, women are also in the minority, when they are even recognised at all.

**Healthcare men and women in Coronavirus cartoons**

Male healthcare workers are shown fighting hard against the virus (Muzzafar Yulchiboev, Uzbekistán; Seyran Caferli, Azerbaijan), in close-quarters combat with death (Naji Benaji, Iran), against a coronavirus-headed hydra (Osval, Cuba), in a boxing match (Kap, Spain; Angel Boligan, Cuba; Luojie, China), or armed as soldiers (Angel Boligan, Cuba) or even in a trench (Michael Ramirez, USA; Steve Benson, USA), bombarded with the virus (Paolo Lombardi, Italy). Arend van Dam (the Netherlands) draws a healthcare worker in front of a tank driven by two viruses, in a scene reminiscent of Tiananmen square; Michael Kountouris (Greece) shows another worker carrying a cross, referring to the “via crucis” that the fight against this pandemic represents.

Cartoonists reflect on how difficult it is to contain the virus, which spreads surprisingly quickly. Saman Torabi (Iran) shows a healthcare worker armed with an axe, trying to contain the virus, which keeps growing like the magic beanstalk. Male figures predominate in this fight against the pandemic: healthcare workers are like Sisyphus, waging an all-out war that is constantly restarting (Martin Sutovec, Slovakia).

In this sense, nurses appear much less frequently than expected and they are seldom the protagonists, their role commonly stereotypical. They might accompany the doctor (Diana Bledsoe, USA) and listen to their diagnosis while performing care-giving tasks (Dennis Rano, USA; Chip Bock, USA), appear as the doctor’s confidant (BAES, Germany; Dana Summers, USA), or be objectified with a sexy miniskirt (M. Moeller, UK; Ferreres, Spain), which is completely unexpected when addressing a collective health disaster of this type. In a cartoon by Pierre Ballouhey (France) representing the national 14 July parade, men lead the march with stethoscopes and the patients while
women follow with miniskirts, revealing cleavage, and carrying syringes and bedpans (Figure 5). Nurses are sometimes depicted as tyrannical and bad-tempered (Chip Bok, USA; Gary Varvel, USA) or making absurd remarks (Mike Peters, USA). Dennis Rallo (USA) draws two children playing superheroes: the boy is characterised as a doctor and the girl as a nurse.

Some cartoons show nurses as heroines (Antonio Rodríguez, Mexico; Tom Stiglich, USA), as ‘supernurses’ (Ken Catalino, USA), or paying attention to a patient’s last words as ‘angels of mercy’ (Crowe, USA), emaciated and exhausted. Only the North American cartoonist Bruce Plante draws a nurse as a soldier (‘modern day combat soldier’), using a military metaphor with female representation. The North American cartoonist Kevin Siers draws a nurse carrying the world on her back (‘Covid19 Burden’). Continuing with war metaphors, two cartoons reinterpret the famous wartime We can do it! poster with women nurses.

Cartoonists denounce the difference in ‘weaponry’ of soldiers and police when compared with healthcare workers: ‘Sorry we can’t afford equipment like masks for you’, a federal budget accountant tells a nurse, with a fully-equipped policeman standing next to him (Dave Whamond, USA). Adam Zyglis (USA) draws Darth Vader, the famous Star Wars villain, lending his mask to a woman doctor.

Women doctors assisted by male workers appear only in two cartoons: under the title ‘America’s frontline fighters’, Andy Marlette (USA) shows a woman doctor accompanied by a male nurse, and cartoonists Idígoras & Pachi (Spain) draw two characters wearing a white coat with the names ‘Dra. Gómez’ (a woman, because ‘Dra.’ indicates the female term for doctor in Spanish) and ‘Nurse Martínez’ (a man, because ‘enfermero’ is a male noun in Spanish), both victims of COVID19, paying homage to their sacrifice (Figure 5). It is surprising to see that women doctors are shown subjected to a male figure, since women in general are so rarely depicted in cartoons, and that they tend to be accompanying nurses (Jimmy Margulies, USA).
Male patients

COVID-19 patients are also predominantly represented as men in most cartoons. Many of them are, just as in the case of doctors, middle-aged white men who are sometimes attending a consultation together with their wives, who still fulfill the role of companions (Carré, Belgium; Fran, UK; Paul Fell, USA). In a cartoon by J. M. Nieto (Spain), the patient talks to his family using a mobile phone as two healthcare workers completely covered with a protective suit take care of him. He says: “Don’t worry, family, I’m okay. Here they do anything for patients. And I am being taken care of by some gorgeous nurses.” (‘No os preocupéis, familia, estoy bien. Aquí se desviven por los enfermos. Y además me atienden unas enfermeras guapísimas’). Note that ‘enfermeras’ is a female noun in Spanish.

In one of the cases in which the patient in the cartoon is a woman, she is an elderly woman living in a retirement home (Signe Wilkinson, USA). In another (Phil Hands, USA), a woman dressed for a party comes to the doctor’s office and says: ‘I, like, went out drinking with my friends at a crowded bar last week, and I have a cough and a fever?’, to which the doctor responds: ‘You are experiencing symptoms of selfish stupidity’.

Discussion. Where are women healthcare workers in coronavirus cartoons?

In the studied sample, women are rarely seen as the protagonists. They do not have authority nor leadership; they instead perform a dull, subordinate, and thankless job. The sample confirms that there are more male cartoonists than female cartoonists, as seen in previous studies (Samson and Huber, 2007). The limited number of cartoons drawn by women may have contributed to the lack of significant differences based on the gender of the cartoonist. Cartoonists do not show women as leaders, that role is reserved for men. Doctors and vaccine researchers are depicted as men. This lower rate of appearance of women in cartoons about vaccine research clashes with a recent study showing that the image of a woman researcher made a better impression than a man (Porcar et al., 2019). However, this underrepresentation of women is common and consistent with previous works on the media representation of women doctors and scientists (Wood, 2011; González et al., 2017). But this situation is also perpetuated in other fields such as competitive sports. An analysis of sports magazine covers showed that women appear sexualised and smiling more frequently, while men are shown in more active, athletic poses (Wasike, 2020).

The metaphors used in the discourse about this pandemic have also contributed to widening the gender gap. In fact, this lower visibility of women is also evident in the number of cartoons using military metaphors, where healthcare workers are soldiers in battle against the virus. Another common metaphor, often used in relation to war, is sports (Domínguez and Sapiña, 2016). This competition rhetoric – the race against the disease, the match we need to win, etc. – is dominated by male representations. Despite living in a world in which the inclusion of women in both the military and in elite sports is a reality, stereotypes of these two fields persist in the collective imagination.
Even in a feminised profession such as nursing, men are also predominant, as if the male figure were the standard for representing human beings in general. And when women appear, they are represented in a subordinate role, with no specialty of their own, and using one of the four main nursing stereotypes: the angel, the handmaiden, the battle-axe, and the sex symbol (Holloway, 1992). In media, nurses are rarely recognised as health experts or important scholars (Summers and Summers, 2015). Rather, they remain invisible in health news media, despite their increasing levels of education and expertise (Mason et al., 2018). As this study notes, nurses were cited as sources in only 2% of health news and appear in only 4% of related pictures. Nevertheless, new ongoing research suggest that during the COVID-19 pandemic, nurses were represented in media outlets from Italy, the United Kingdom, and the USA mainly as heroes, reliable and trustworthy people, and well-educated professionals (Bagnasco et al., 2020). Our results, however, show that in pandemic-related cartoons, women nurses are still less present than their male colleagues and appear mostly in stereotypical roles that do not reflect the reality of the profession. When US President Donald Trump is characterised as a doctor, he is drawn as a man; conversely, when he represents a nurse, he is dressed as a woman. That is to say, when people imagine a nurse, even when the character is a man, it is represented as a woman.

Women are not protagonists when they are patients, either. Even though more men than women died of coronavirus in the early months of the pandemic, institutions such as the World Health Organization (2020, 14 May) warn that available data came from relatively few countries and were, therefore, skewed. They add that we must not forget that women are a majority in the global healthcare workforce and in high-risk of infection jobs. In fact, in countries such as Spain, there has been more than twice as many cases of COVID-19 among female healthcare workers, compared to their male counterparts (Turquet and Koissy-Kpein, 2020). Therefore, it does not seem logical to underrepresent women patients of the disease.

This study is limited to an analysis of gender but maybe other biases (related, for instance, to ethnicity or age) can be found in this type of representation of health care workers. Further research would be helpful to obtain a broader perspective on existing inequalities.

Conclusion

Despite the prominent role of women in the current healthcare crisis, they are consistently underrepresented in pandemic-related cartoons. The man doctor/woman nurse pairing is still very present in the representation of these professional collectives. Women doctors are rendered invisible, and even women nurses are less present than their male counterparts. On most occasions, women are also drawn to represent sweet angels, caring mothers, bossy governesses, or sexy ladies, perpetuating stereotypical images.

Efforts have been made, from some perspectives, to improve the media representation of female healthcare workers, but we need to keep striving to show images that are closer to facts, abandoning old stereotypes that are in no way consistent with the reality of medical facilities.
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Note

1. The United States Marine Corps War Memorial (Iwo Jima Memorial) is a national memorial located in Arlington County, Virginia, in the United States. The memorial was dedicated in 1954 to all Marines who have given their lives in defense of the United States since 1775. The war memorial was inspired by the iconic 1945 photograph of six marines raising a U.S. flag atop Mount Suribachi during the Battle of Iwo Jima in World War II, taken by Associated Press photographer Joe Rosenthal. Source: Wikipedia (available at https://en.wikipedia.org/wiki/Marine_Corps_War_Memorial).

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