

A CONTENT ANALYSIS OF REPRODUCTIVE HEALTH ARTICLES

IN *JEZEBEL.COM* AND *GLAMOUR.COM*

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A Content Analysis of Reproductive Health Articles
in *Jezebel.com* and *Glamour.com*

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Abstract

This study explored health coverage by the popular women’s websites *Glamour.com* and *Jezebel.com* from May through October 2012. In these months preceding the November 2012 U.S. election, the media frequently referenced “The War on Women,” which the ACLU defines as actions and statements that aim to oppress women and threaten to restrict access to basic health care services. Content analysis was the method of investigation used in this study, including quantification of more than 30 health and reproductive health topics. These articles’ (N = 889) calls to action (CTAs)—defined as statements encouraging individual or collective action—were analyzed to determine how frequently feminist-framed health activism was recommended. Lastly, a stratified subsample of articles (n = 220) was analyzed to see whether CTAs correlated with an increase in readers’ social media sharing of these health articles. Because discussion of women’s reproductive health topics, including abortion, is still relatively taboo in the U.S., the literature on media coverage of these subjects is limited. This thesis aimed to add to the literature relating to women’s reproductive health in light of its role as a highly relevant topic in the U.S. political landscape.

INTRODUCTION

The political and health care landscape in the U.S. in 2012

Women's health care, especially reproductive health care, was a prevalent, controversial topic in U.S. media in 2012. Reproductive health care pertains to birth control, prenatal care, and breast exams and mammograms, and also includes divisive topics including abortion and contraception, including the so-called "morning after" medications to prevent pregnancy (National Institutes of Health, 2013). The frequency with which reproductive health articles appeared in the media during 2012 may be attributed in part to ballooning health-care costs (Kaiser, 2012), and to the political campaigning leading up to the presidential and congressional elections in November, in which women's rights figured as a major and, eventually, a central issue (Raftery, 2012).

One factor contributing to this prevalence was the federal Patient Protection and Affordable Health Care Act (PPACA), which passed into law in 2010; most of its mandates were upheld as Constitutional in June, 2012, including the requirement that most corporate-sponsored insurance plans cover birth control (Federal Register, 2012). This led to numerous lawsuits being filed on behalf of religious groups, hospitals, and private employers that oppose the birth control mandate for philosophical or religious reasons (UCLA School of Law, 2012). It also contributed to reproductive health care coverage being a significant, divisive issue in the elections.

The term "War on Women" was used as early as 1996 in *The Republican War on Women* by Tanya Melich (Rich, 2012, para. 16); it has been used increasingly in the media and in the public vernacular to refer to verbal criticisms made and legislative

actions taken to restrict women's access to reproductive health services, including and especially by the mainstream U.S. media. According to a Lexis-Nexis database search, 142 times as many articles featuring the term "War on Women" ran in U.S. media in 2012 compared to 2008 (Lexis-Nexis search, March 8, 2013).

Throughout last year, media coverage of reproductive health issues often included the phrase "War on Women," in both text and headlines. Not all media outlets, however, overtly used this specific term in their reporting and writing. For the sake of this thesis, health articles that refer to events that fall under the following definition from the American Civil Liberties Union (ACLU) were analyzed, along with those that do not use the phrase:

The 'War on Women' describes the legislative and rhetorical attacks on women and women's rights taking place across the nation. It includes a wide-range of policy efforts designed to place restrictions on women's health care and erode protections for women and their families. Examples at the state and federal level have included restricting contraception; cutting off funding for Planned Parenthood; state-mandated, medically unnecessary ultrasounds; abortion taxes; abortion waiting periods; forcing women to tell their employers why they want birth control, and prohibiting insurance companies from including abortion coverage in their policies. (ACLU, 2013, para. 1)

One such specific event that may be categorized as part of the War on Women includes Rush Limbaugh, the conservative talk-show host, publicly rebuking Sandra Fluke. Fluke was a Georgetown Law student who lobbied for and expressed support of the PPACA's insurance coverage for contraceptives (Glamour.com, 2012a). The topic of rape also frequently appeared in the media in the months leading up to the November 2012 election, including politicians discussing the definition of "legitimate" rape and whether pregnancies resulting from rape were "God's will." (Baumann, 2012; Geiger, 2012; Jackson, 2012; Saletan, 2012). These events led *New York Times* columnist

Thomas L. Friedman to describe some Republican politicians who made public comments on rape as “borderline crazy” (Friedman, 2012, para. 3). Several media publications ran articles describing a “rape culture” in the U.S. that does little to prevent or prosecute sexual assault (Atherton-Zeman, 2012; Jeffries, 2012).

Other War on Women-related events include how the breast cancer charity and research organization Susan B. Komen for the Cure was widely criticized starting in February 2012 for withholding funding for breast cancer screenings to Planned Parenthood, a nonprofit organization that provides reproductive health care to teenagers and women, including low-cost or free birth control as well as abortions (Rovner, 2012). Also, in June 2012, the Michigan legislature effectively silenced State Representative Lisa Brown during her statements in support of reproductive health care access after she mentioned the word “vagina” during her speech (Roberts, 2012). Brown was banned from the floor for the remainder of the arguments. In 2012, even when women were able to gain access to male-dominated environments such as state legislatures, their voices were quashed, prompting criticisms from public leaders that compared the climate for women in 2012 with that of the Middle Ages (Thistlethwaite, 2012).

Throughout 2012, numerous states attempted to pass, or successfully passed, legislation placing unprecedented restrictions on women’s access to health care, including contraception and abortion (Center for Reproductive Rights, 2012). Proposed legislation that prompted extensive public debate included increased wait times prior to abortion in states including Pennsylvania; Michigan; Arizona—which also passed a law redefining the point at which human conception occurs—and Virginia, which attempted

to legislate requirements that women to undergo invasive trans-vaginal ultrasound prior to receiving an abortion (Guttmacher Institute 2012b; Tavernise, 2012, Yau, 2012).

The War on Women can be looked at as a collection of overtly and covertly hostile actions that criticized women and attempted to deter or entirely prevent them from seeking reproductive health care services. The goal of this paper is to analyze the quality and characteristics of the coverage of reproductive health topics and the War on Women in the months leading up to the 2012 election by two popular websites, *Glamour.com* and *Jezebel.com*. *Glamour.com*'s editors and promotional materials describe the publication as being supportive of women. *Jezebel* is described as “feminist” by its editors and its vocal, award-winning staff writer Lindy West (*Jezebel.com*, 2012b; West, 2012; West, 2013). In the words of Barbara Smith from a speech at the 1979 National Women's Studies Association conference, the definition of “feminism” is “...the political theory and practice that struggles to free all women: women of color working-class women, poor women, disabled women, Jewish women, lesbians, old women—as well as white, economically privileged, heterosexual women” raising awareness of gender inequalities and encouraging women to speak out and act on their concerns (Dicker, 2008, p. 7).

Importance and prevalence of health coverage in woman-focused media

Reproductive health access and rights are of great importance to women of childbearing age in the United States. According to the nonprofit Guttmacher Institute—which, it should be noted, was formerly financially affiliated with Planned Parenthood—43 million American women are at risk for unintended pregnancy. More than 99 percent of women ages 15 to 44 who have been heterosexually active have used contraception (Guttmacher Institute, 2013 and 2012a). According to National Magazine Association

data, women's mainstream magazines typically devote approximately 15 percent of their editorial space to health topics (Magazine Publishers of America, 2012b); therefore, it was predicted that a significant number of health articles would be found in this content analysis.

Of arguably greater concern than the quantity of these articles, however, is the quality of their content and its potential influence on readers (and, by extension, possibly even political elections). Have these articles encouraged support for women's reproductive rights, either individually or collectively through calls to action, which are aligned with the goals of feminist theory, including the goals of overcoming the oppression of intersectionality? If few calls to action are seen, it will raise the question: to what degree do women's reproductive rights and bodies need to be threatened or publicly insulted before female-friendly media—let alone mainstream media—encourages readers to act to oppose public insults and legislative actions that are severely anti-woman? U.S. women rely on mass media for awareness of health issues (Nicholson, Gardner, Grayson, & Powe, 2005). The coverage of these topics by very popular publications including *Jezebel.com* and *Glamour.com* is therefore important to women's health.

Decades of advancements in women's access to reproductive health care were at risk in 2012, from state-level restrictions on abortion access gained in 1973's *Roe v. Wade* decision, to improved access to contraception that was a hard-won goal of the women's health movement (WHM) of the 1970s (Morgen, 2002; Seaman, 2012). More recent, groundbreaking improvements in women's health care and greatly widened access and insurance coverage credited to the federal Patient Protection and Affordable Care Act (PPACA) were also threatened (Guttmacher Institute, 2012c; Harris, 2012).

LITERATURE REVIEW

For this literature review, I first provide background information and readership data about the media outlets in this content analysis. Then, I link these publications to the feminist theory of intersectionality and provide an overview of feminist theory and criticism, including the First, Second, and Third Waves of feminism. I then include a summary of the Women's Health Movement, to provide an understanding of the decades of work that were required for women to earn reproductive rights and access to health care. Next, I examine the roots of intersectionality as espoused by Crenshaw and Collins; past and current criticisms of this dynamically evolving theory; and a framework for how intersectionality applies to the health articles in both *Jezebel.com* and *Glamour.com*. The Literature Review concludes with the Hypothesis and Research Questions.

The media under analysis

Jezebel.com (www.jezebel.com) was founded in 2007 by Gawker Media, a company that, as of December 2013, claims 45 million readers per month (up from 32 million in June 2013); 2.5 million Facebook fans; and 3.3 million Twitter followers (Gawker Media, 2013a; *Jezebel.com*, 2012a). Jezebel's readership increased significantly and steadily throughout 2012, and exceeded that of its parent site, *Gawker.com* (*Jezebel.com*, 2012d, p.1). In early 2012, *Jezebel* had an estimated 3.6 million monthly readers, 95 percent of whom were estimated to be female (Gawker Media, 2013a). As of December 2013, that number had risen significantly to 5.3 million visitors, and *Jezebel.com* now has 229,000 fans on Facebook and more than 160,000 followers on Twitter (Gawker Media, 2013b).

Jezebel.com, named after the “wicked, seductive” Biblical Jezebel (Gordon, 2013), targets young adult female readers as its core audience (*Jezebel.com*, 2012d)—women very likely to be sexually active and, if heterosexual, in need of contraception. *Jezebel* covered the War on Women extensively in 2012. *Jezebel* takes a pro-woman viewpoint in its often profane and sarcasm-filled reporting. A sample headline from October 2012 was, “Introducing ‘Emergency Rape,’ This Season’s Hottest Rape Trend” (Ryan, 2012a). *Jezebel* editor-in-chief Jessica Coen told the *New York Times* in 2010, “We’re absolutely not afraid to take on the things that need to be taken on, and we’re not afraid to say things that need to be said” (Mascia, 2010, para. 9).

Glamour.com is similarly popular. Its media-kit metrics report for advertisers indicates the site reaches up to 5.7 million “unique views,” or individual visitors, each month, and that 1 in 10 U.S. women reads the print version (*Glamour.com*, 2013). According to the same metrics report, the total average number of monthly page views from these visitors is 44.9 million. Like *Jezebel*, *Glamour.com* targets younger readers, primarily those in the 18- to 34-year-old range (Elliott, 2012). *Glamour*’s print edition and, by extension, its website and blog, are distinctive for covering topics rarely covered by other popular women’s publications. For example, since 1990, the print edition of the magazine has given its *Glamour* Woman of the Year award, which has traditionally recognized politicians and activists who have worked to improve women’s rights in the U.S. or other countries.

One of *Glamour*’s eleven Women of the Year for 2012 was Pakistani activist and filmmaker Sharmeen Obaid-Chinoy, who publicized acid attacks against women (Robbins, 2012) and in February 2013 won an Academy Award for her documentary,

Saving Face (Coombe, Junge, & Greenberg, 2013). Other 2012 award winners include Supreme Court Justice Ruth Bader Ginsburg and television screenwriter and actress Lena Dunham, whose television series *Girls* gained notoriety for its bold depictions of modern-day sexuality of women in their early twenties (Rosenblum, 2012). Esraa Abdel Fattah was *Glamour's* Woman of the Year for 2011; she risked her personal safety by leading pro-democracy protests in Egypt's violent Tahrir Square (Robbins, 2011).

Glamour also ran a campaign to raise awareness of dating and relationship violence (Lodge, 2011) and won a National Magazine Award in 2012 for "The Secret That Kills Four Women a Day," by Liz Brody, a feature on dating violence (Brody, 2011; CondeNast.com, 2012), which is a topic not frequently covered in mainstream women's magazines. *Glamour* was also unusual among mainstream women's magazines because for many years, it ran a column on women in politics; this column was discontinued after editor-in-chief Bonnie Fuller discontinued it in 1998 (Kuczynski, 1998). The *Glamour.com* website, however, currently features a section devoted to politics (Glamour.com, 2013).

Jezebel.com and *Glamour.com* were specifically chosen for analysis in this thesis because they both have woman-friendly and feminism-influenced editorial approaches that are removed from the purely feminist approach such as *Ms.com*, *Bitch.com*, or *Feministing.com*. *Jezebel* and *Glamour* seek a larger audience, and therefore a wider influence. At the same time, both are publications likely to frequently cover War on Women-related stories, and were expected to provide an adequate sample size of content to be analyzed for this research. In addition, their online formats, including *Glamour.com's* blog, Vitamin G, allow for editorial reactions to current events, including

political developments, much more quickly than print publications. This is beneficial to this study, given that health news related to the War on Women and reproductive health topics appeared with frequency on these websites. Like most online magazines and blogs, *Glamour.com* and *Jezebel.com* also encouraged their readers to comment on their articles and also suggested their audience members share articles, and their own and other readers' comments on these articles and blog posts, providing an additional measurement for this thesis: Are articles containing calls to action more likely to be shared online than those without calls to action?

Theoretical rationale

This thesis highlights the feminist theoretical concept of intersectionality discussed by Patricia Hill Collins in *Black Feminist Thought: Knowledge, Consciousness, and the Politics of Empowerment* (Collins, 2008), the text often cited as the first to coin the term “intersectionality.” In *Black Feminist Thought*, Collins states that multiple forms of oppression—among them race, gender, socioeconomic status, bodily ability, and sexual preference—act on women in complex and amplified ways (pp. 138-45). The theory of intersectionality was developed primarily to target Second Wave feminism’s earlier deficiencies: the tendency to focus overwhelmingly on the concerns of middle- or upper-middle-class, heterosexual, able-bodied Caucasians, while overlooking the concerns of gay and bisexual women; racially diverse individuals; the disabled; and those in diverse socioeconomic groups (Collins, 2008, p. 294; Nash, 2008, p. 3).

Intersectionality theory naturally applies to the media under scrutiny in this content analysis. As Amy R. Baehr writes, feminist theory “includes the claim that individuals have a right to control their own bodies” (Baehr, 2012, p. 17). Indeed, one of

contemporary, or Third Wave, feminism's concerns is "the protection of health care rights, reproductive rights, and equity" (Garrison, 2000, p. 143).

Many of the reproductive health articles under examination were published in reaction to War on Women–related events and public statements that exemplify women's oppression on a number of levels. One example widely covered in the media in 2012 was conservative radio talk show host Rush Limbaugh's repeated public criticisms of law student Sandra Fluke for being an unmarried sexually active woman who is also concerned about the cost of birth control. Limbaugh used the term "slut" to describe her on his national radio show, a program broadcast to more than 600 stations and which is promoted as the most-listened to radio show in America (Ms. Blog, 2012; RushLimbaugh.com, 2013). While he eventually apologized (Limbaugh, 2012), he did not do so until after publicly asking her and other unmarried, sexually active women like her to post naked photos of their bodies online (Reeve, 2013).

The cutbacks in access to Planned Parenthood clinics and other forms of reproductive health care in Mississippi, Michigan, Arizona, Texas, Virginia, and other states are examples of actions taken that threaten women's health, and ones that predominantly affect minority women of less advantaged socioeconomic statuses. Feminist theory can be directly applied to the media being examined in this research by measuring how many articles include an individual call to action to oppose these threats; a collective call to action; both individual or collective calls to action; or no calls to action.

Related "points of connection" to intersectionality, or areas in which anti-oppression work is needed (Allan, 2006) include feminist sociological and science theory, including the sexual empowerment writings of Jane Gerhard's *Desiring Revolution* (Gerhard,

2001); Emily Martin's examination of disempowering physical and medical metaphors of females in *The Woman in the Body* (2002); Anne Fausto-Sterling's writings about how "our ideas about the human body were shaped by politics and culture" (Dreifus, 2001; Fausto-Sterling, 1992, 2000, and 2012); and the ways in which medical and scientific research on the human body have largely medicalized women's bodies using highly derogatory language (Wylie, 2010).

It is important to note that the writers and editors of *Glamour.com* and *Jezebel.com* focus their editorial content on and target their advertisements primarily to young, white, middle-class women. Therefore, as this thesis will detail, it may be argued that they participate in the very intersectionality that Collins describes and contribute to the anti-female forces these publications' editors themselves state that they oppose. It is true that *Jezebel* and *Glamour* covered reproductive health issues in 2012, including articles on how access to and insurance coverage of birth control, as well as how reduced access to abortion services disproportionately affects racially diverse women and women who are socioeconomically disadvantaged. *Jezebel* also published health articles on women of many races, including the extremely high prevalence of rape on Native American reservations; forced marriages in Iraq leading to young girls' suicides; and lack of access to sanitary restrooms for women in India. (Murdoch, 2012c; Murdoch, 2012a; Baker, 2012a). But, as this thesis will examine, despite their bluntly stated pro-woman editorial missions, these two publications' editorial treatments of intersectionality-related subjects ultimately may have been more oppressive in nature than ameliorating.

This thesis analyzes the differences in the text of these two publications' coverage of health and reproductive health topics, and what potential implications lie therein for the

feminist goals of eradicating inequality between the sexes, including disparities in health care coverage. This will be accomplished by closely measuring and examining the content of online magazine articles and blog posts that cover general health topics, as well as the intersection of health and politics: reproductive health rights. This research will examine these and other health articles in these two mainstream online women's publications from May through October, 2012, which are the six months preceding the November 6, 2012 presidential and congressional elections.

This thesis serves to fill a current gap in research, as scholars have conducted little feminist academic research on the reporting of women's health care in mainstream women's magazines. Two examples of past feminist-inspired analysis of coverage in mainstream women's magazines are Hinnant's "The Cancer on Your Coffee Table" (2009) and Julie L. Andsager and Angela Powers's study, "Framing Women's Health with a Sense-Making Approach: Magazine Coverage of Breast Cancer and Implants" (2001). Another study of women's magazines, "A Feminist Analysis of *Seventeen* Magazine: Content Analysis from 1945 to 1995," is also informed by feminist theory (Schlenker, Caron & Halteman, 1998), though it does not focus primarily on health content.

Most academic research pertaining to sexual and reproductive health, and these topics' coverage by popular magazines, focus on adolescents and the media they are exposed to (Walsh-Childers, Gotthoffer & Lepre, 2002; Hust, Brown & L'Engle, 2008; Walsh & Ward, 2010). For example, Walsh and Ward studied teens' media exposure to measure its effects on safe-sex practices. Since adults are assumed to be more responsible than teens regarding birth control practices, the number of studies on reproductive health that focus

on teen media exposure is understandable. The need for deeper knowledge of the media's approach to covering reproductive health and contraception for adults remains. This thesis aims to help fill what appears to be a noticeable gap in feminist research and analysis of health content related to women, specifically women's reproductive health, as it is covered by widely read online publications.

Feminist theory, criticism, and activism

To more fully understand the application of intersectionality to this content analysis of reproductive health articles, an overview of the accomplishments and failures of feminist activism related to reproductive health, plus criticisms of this activism's omissions, are necessary. Feminism has been broken into three major "waves" of activism, with the so-called First Wave running from the mid-1800s to 1920, when women received the right to vote with the ratification of the 19th Amendment; the Second Wave, often cited as running through the sexual revolution of the late 1960s; and the current Third Wave, often regarded as beginning with the Barnard College conference, "The Scholar and the Feminist IX: Toward a Politics of Sexuality," held in 1982 (Gerhard, 2001, p. 9). It should be noted there is no consensus over these dates. For example, Charlotte Krolokke, co-author of *Gender Communication Theories and Analysis*, cites the early 1990s as the start of the Third Wave (Krolokke, 2006); writer Rebecca Walker states it was the mid-1990s (Walker, 2009).

Feminism's First Wave: Contraception and the Comstock Laws

The focus on achieving women's suffrage was by far the primary focus of First Wave feminist activism, and is pinpointed by many scholars as beginning with the July 1848 convention in Seneca Falls, New York (Dicker, 2008; McBride and Parry, 2010). The

feminist accomplishments that most pertain to this content analysis is the activism by Emma Goldman, who was jailed at the turn of the century for distributing pamphlets describing birth control methods, and Margaret Sanger, who coined the term “birth control” in 1914 and dedicated herself to broadening women’s access to contraception. During her activist work, Sanger was arrested and jailed for distributing a pamphlet called “Family Limitation” (Dicker, pp. 52-53), as doing so was considered obscene.

While Sanger deserves criticism for her related support of racism- and disability-based eugenics, she also deserves commendation for her fight against the Comstock Law, which deemed the advertising and distribution of information pertaining to or contraceptives themselves to be immoral, and outlawed both their advertisement and activist work like Sanger’s. Sanger’s grassroots efforts to provide birth control to women throughout the United States eventually led to the 1919 founding of the organization that came to be known as Planned Parenthood (Dicker, p. 53). While Sanger wasn’t a feminist theorist herself, her work was enabled by the influential feminist theoretical and philosophical writings of John Stuart Mill. His *Subjection of Women* emphasized that women, specifically wives, should not be treated as second-class citizens (Mill, 1988).

Second Wave feminism: Empowering female sexuality

Psychoanalysts Karen Horney and Helene Deutsch acted boldly when they criticized the predominant sexual thought in the 1930s: Sigmund Freud’s psychoanalysis, especially its focus on penis envy and femininity as “failed masculinity” (Gerhard, pp. 33-35; 37). While Horney believed in “women’s innate heterosexuality” (p. 35), an approach refuted by modern-day feminist theorists such as Anne Fausto-Sterling (*Myths of Gender*, 1992; *Sexing the Body*, 2000), the temerity of these women’s writings in

opposition to Freud's looming influence is striking. In the years from 1920 to 1940, "sex experts offered the public a modern view of female sexuality as important to marriages, important to women's mental health, and important to the maintenance of men's natural authority" (Gerhard, p. 23). Horney and Deutsch laid the groundwork for other feminists to begin opposing this domination.

The two most provocative, sociologically influential, and widely consumed books of the latter half of the Second Wave are Betty Friedan's *Feminine Mystique*, from 1963, and Kate Millett's *Sexual Politics* (1970). Friedan is one of three co-founders of the National Organization for Women (NOW), which incorporated in 1966 and sought to achieve political and social change. NOW's Statement of Purpose declared,

the time has come to confront, with concrete action, the conditions that now prevent women from enjoying the equality of opportunity and freedom of choice which is their right, as individual Americans, and as human beings.' At their organizing conference (October 29, 1966), participants established task forces on education, employment, the role of women in the family, women's political rights, and images of women in the media. (Radcliffe Institute for Advanced Study, 2013, para. 1)

The Feminine Mystique was a reaction to the stultification Friedan felt as housewife in the 1950s, following her being fired from her media job while pregnant with her second child (Wattenberg, 2012). In her research for the book, Friedan surveyed her fellow Smith classmates 15 years after their graduation, and found many of them, as educated women working as homemakers, were regretting that their intellectual abilities went untapped. They were experiencing a common feeling of dissatisfaction with their predetermined sex roles in the world, and were enduring a "loss of *sense of self* and *individuality*" (Gerhard, p. 88; emphasis added).

Similarly, Kate Millett influenced American women and society as a whole with her feminist book, *Sexual Politics*. In what has been deemed one of the 10 most important books of the 20th century (University of Minnesota, 2012), Millett described women's social roles—and sense of self, to echo Friedan—as defined by patriarchal oppression. She cited Max Weber's term "*Herrschaft*," to describe the dominance of males and subordination of females (Millett, 2000; CWLU Herstory Website Archive, 2013, para. 5). Friedan pinpointed American women's anomie, while Millett used the term "patriarchy" to label the force acting upon these dissatisfied women.

Patriarchy became a household term and fired up the public—*Sexual Politics* became a bestseller, and Millett was featured on the cover of *Time* magazine. Friedan and Millett primed U.S. women for empowerment and activism, including sweeping improvements in their sexual identities. This soon included demands for more humane, sensitive, and life-changing access to health care.

Following the labeling of patriarchy's oppressive powers, a second essential element of Second Wave feminist theory that colors this thesis's research are the writings on women's empowerment, namely its relation to sexuality. Harvard University lecturer Jane Gerhard collected in *Desiring Revolution: Second-Wave Feminism and the Rewriting of American Sexual Thought, 1920 to 1982* (Gerhard, 2001). According to Gerhard, a theme

emerges when radical feminist theory is examined as a whole. That theme is the political importance of women's sexual self-determination.... Within early radical feminism, the clitoris became a distinctively feminist body part...saturated with the values of autonomy, authenticity, and liberation. (Gerhard, 2001, pp. 6-7)

This liberation was linked in part to the research of Shere Hite, who debunked Freud's theory of the "vaginal orgasm" from surveying 3,500 women for her *Hite Report on*

Female Sexuality. Her research found 70 percent of women did not orgasm during sexual intercourse (Shey, in Seaman with Eldridge, 2012, p. 23). Hite's research, published in 1976, was notable as it put women first, as she wanted to "...let women define their own sexuality—instead of doctors or other (usually male) authorities (Gerhard, p. 23).

This focus on empowerment also drew attention from feminist theorists such as Shulamith Firestone, who radically advocated that women turn to scientific technology to free themselves from the "burden" of childbearing in her 1970 book, *The Dialectic of Sex*:

...Firestone envisioned a society without oppressive heterosexuality as its foundation. To undo patriarchy required the undoing of the nuclear family. To undo the nuclear family required undoing the link between families and reproduction, a link that depended on women. "We have seen how women, biologically distinguished from men, are culturally distinguished from 'human.'" (Gerhard, 2001, p. 97)

By negating the reproductive role, Firestone envisioned a society of "polymorphous sexuality" where sexual relations were based solely on pleasure, not patriarchal, female-marginalizing reproduction. Collectively, Firestone's theorizing and Millett and Friedan's "paradoxical engagement with Freudian psychoanalysis" (Gerhard, p. 98) was key in "[refashioning] the sexual and reproductive potential of the female body...feminists reclaimed the female body as both the symbolic location of and source for women's true social and political liberation" (Gerhard, p. 98). The paradoxical intersecting with Freudian theory is important, as it foreshadows Patricia Hill Collins's work on intersectionality, to be detailed in the discussion of Third Wave feminist theory.

The Women's Health Movement and the public sphere

This potential was embodied in the 1970s, when the Boston Women's Health Collective (BWHBC) sought improved access to and improvement of medical treatment for women, focusing on empowering women through knowledge of their own anatomy and health care options, including "cervical examination and menstrual extraction" (Morgen, p. 26). The results included the perennially best-selling reference book, *Our Bodies, Ourselves*; the spread of grassroots Feminist Women's Health Centers; the eventual founding of the National Women's Health Network (Morgen, p. 27); and the start of the U.S. Women's Health Movement (WHM).

Our Bodies, Ourselves frankly detailed sexual health topics never discussed as openly before in the U.S., including birth control options, abortion, pregnancy, and childbirth, as well as sexual orientation, gender identity, women's health activism, and advice for navigating the health care system (Baumgartner & Richards, 2000; Women's Health Information and Resource Center, 2011). Barbara Seaman also contributed to the Women's Health Movement with her book, *The Doctor's Case Against the Pill*, published in 1970, which chronicled the potential adverse cardiovascular and cerebrovascular health effects from oral contraceptives, which had been approved with fanfare by the Food and Drug Administration ten years prior (Morgen, 2002, p. 9). Seaman's research and recommendations that women take greater control of their health care decision-making highlighted the need for women to educate themselves about their anatomy; to obtain quality health care, especially relating to sexual health; and to distrust governmental organizations that did not maintain as priority interests the public's health, and especially women's well-being.

With women discussing sexual health, and birth control becoming a more prevalent topic of conversation, women's personal, sexual, and reproductive health topics morphed from being very private to topics that "emerged into the public sphere" (Morgen, p. 236). While women were able to discuss these subjects in private households, primarily in consciousness-raising groups, it took longer for the media to report on them. *Jezebel's* and *Glamour's* contemporary coverage of women's sexual issues and reproductive health starkly contrast with the predominant absence of these subjects in popular media during much of the Second Wave.

The empowering changes in women's health care and the media's changing stance on its coverage is detailed in Sandra Morgen's *Into Our Own Hands: The Women's Health Movement in the United States, 1969-1990* (2002). Like Andsager and Powers's research on breast cancer in the media (2001), it relates how, prior to this timeframe, most women's health topics were treated by the media as utterly taboo, including breast cancer, but slowly gained acceptability as story topics in newspapers and on television. This sea change is credited with benefiting women's health, notably by promoting screening and treatment of breast cancer (Morgen, 2002).

This widespread grassroots growth of women's health clinics and the willingness of the media to cover women's health topics—even those that traditionally were avoided in everyday conversation, let alone the media—have political implications. Morgen writes of her experience writing *Into Our Own Hands*, "I wrote this book because it is important to know that political activism makes a difference" (2002, p. xiii). With breast cancer, mammography, and monthly breast self-exams now common topics in media of all kinds, awareness of screenings and symptoms has been raised, and lives have been saved. While

some health activists state that over-diagnosis and treatment of breast cancer is a concern—such as negative biopsies following breast self-exam (Morgen, 2002, p. 235; Cochrane Summaries, 2008)—the use of mammography as a screening tool has been credited with a significant improvement in mortality rates of women diagnosed with breast cancer (National Cancer Institute, 2013).

Simultaneous to these public changes in women’s health care, awareness, and public dialog during feminism’s Second Wave, the right of U.S. women to obtain abortions was secured with the January 1973 passage of *Roe v. Wade*. It was a “passionately sought goal of the women’s movement” (Stansell, 2011, Chapter 10, para. 2), and one won (somewhat paradoxically, considering the sweeping changes to the more public status of women’s health) on the basis of the rights of privacy.

Despite the passing of *Roe v. Wade* and the knowledge women gained due to *Our Bodies, Ourselves* and consciousness-raising groups, and arguably *because* of the hyper-focus on women’s sexual pleasure, however, sexism in the 1970s was still rampant (Gerhard, 2001, p. 109). African-American feminists, including a Cambridge, Massachusetts-based group called the Combahee River Collective, which counted among its members poet Audre Lorde, were also dissatisfied with the multiple ways in which they experienced oppression, among them “racial, sexual, heterosexual, and class oppression” (Combahee River Collective Statement, 1977, para. 1). In hints of the intersectionality theory to be identified by Collins, the Collective itself experienced internal disagreements between lesbian and heterosexual members and “class and political differences” (1977, para. 28).

Feminist theory’s splintering in the Third Wave

As reproductive and sexual health issues moved into the public sphere, feminist theory simultaneously underwent a splintering of its focus. At the Barnard Scholar and Feminist IX conference in 1982, feminist theorists met to codify feminist theory and feminism's goals, but instead shined a spotlight on the multiple types of oppression facing women, dissolving any progress toward unified efforts toward equality.

Anti-pornography scholars including Catharine MacKinnon, who advocated for pornography to be made illegal, and Andrea Dworkin, who felt porn was a violation of civil rights, raised the ire of anti-censorship feminists, who felt the focus of anti-pornography feminists dealt predominantly with Caucasian, middle- or upper-middle class concerns, to the detriment of women of color, lesbians and bisexual women, the differently abled, and women of differing socioeconomic environments. This chaotic conference set the stage for an altered future approach to feminist scholarship.

As Budgeon writes, Third Wave feminism challenged and challenges earlier, limiting constructions that failed to recognize differences, such as in race or ethnicity, sexual orientation, and gender orientation (Budgeon, 2011). This evolution of earlier feminist thought is embodied in the concept of intersectionality, which originated in Kimberlé Crenshaw's 1989 essay, "Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory, and Antiracist Politics," published by the *University of Chicago Legal Forum*. Intersectionality has developed into what feminist theorist Leslie McCall describes as "...the most important theoretical contribution that women's studies, in conjunction with related fields, has made so far" (2005, p. 1771), "with the primary view to remedying structural injustice"

(Clark, 2012). Jennifer C. Nash ascribes intersectionality with a utilitarian description, as a “tool for excavating the voices of the marginalized” (Nash, 2008, p. 13).

Intersectionality developed out of Crenshaw’s legal work with African American women plaintiffs, who she witnessed being forced to file discrimination lawsuits for either gender or race discrimination, even when both were at play. Crenshaw maintained that “compound discrimination” existed (Crenshaw, 1989, p. 62). Intersectionality was intended to remedy this “single-axis framework” of antidiscrimination law (Crenshaw, 1989, p. 57). The lack of recognition by the legal system of multiple forces of discrimination—“race, sex, class, sexual preference, age, and/or physical ability” (Crenshaw, 1989, p. 65)—Crenshaw writes, “makes the illusive [sic] goal of ending racism and patriarchy even more difficult to attain” (Crenshaw, 1989, p. 66). She continues,

...not only are women of color in fact overlooked, but their exclusion is reinforced when white women speak for and as women. The authoritative universal voice—usually white male subjectivity masquerading as non-racial, non-gendered objectivity—is merely transferred to those who, but for gender, share many of the same cultural, economic, and social characteristics. When feminist theory attempts to describe women’s experiences through analyzing patriarchy, sexuality, or separate spheres [of] ideology, it often overlooks the role of race. Feminists thus ignore how their own race functions to mitigate some aspects of sexism and, moreover, how it often privileges them over and contributes to the domination of other women. (Crenshaw, 1989, p. 67)

The irony of the legal system’s perpetuating racism and sexism was not at all lost on Crenshaw. She writes that the remedy for this situation would be “to facilitate the inclusion of marginalized groups” into the legal system and legislation, and to criticize the dominant views of race and gender discrimination (Crenshaw, 1989, p. 73).

It should be noted that it while many historians credit the Barnard conference as the start of feminism's Third Wave, others cite the Anita Hill and Clarence Thomas sexual harassment trial of 1990 (Crawford, 2007; Dicker, 2008). Regardless of the date of the start of feminism's third and current wave, progress within women's health care is still very necessary. As Laura L. Ellingson comments, "Power in the health care system involves complex contemporary and historical intersections of race, gender, class, sexuality, educational level, and able-bodied privilege and oppressions" (Ellingson, 2010, p. 96). Amy Baehr adds that feminists support the idea that women "have a right to freedom in intimate, sexual and reproductive matters," which includes "reproductive freedom (the right to use birth control) [and] have an abortion" (Baehr, 2012, p. 4). The 122 provisions passed in 42 states and the District of Columbia during 2012, however, restricted or altogether prevented these freedoms (Guttmacher Institute Media Center, 2013).

Third Wave activists Jennifer Baumgartner and Amy Richards, in their book *ManifestA* (sic) (2000), include at the top of their "Thirteen Point Agenda" the goal of "...[making] explicit that the fight for reproductive rights must include birth control" (Baumgartner & Richards, p. 279). The central objective of contemporary feminist theory is to continue to work toward achieving women's equality through mainstream legal and political reforms (Rush & Grubb-Swetnam, 1996). It is important to note the number of theorists who support these mainstream—not radical—reforms. Baehr writes of the desire and necessity of freedom from "coercive interference" from laws, particularly those aimed at women's health (Baehr, 2012, p. 4). These are the same rights that were debated in the media and in state legislatures in 2012 leading up to the presidential election—and

which are continuing to be debated, and eroded, now that the election is over (Parker, 2013).

While these laws are being contested, the language used by medical professionals and the general public when discussing women's bodies and reproduction continues to exhibit noticeable condescension and insulting overtones, which feminist theorist Emily Martin successfully argues is oppressive, demeaning, and disempowering (Martin, 2001).

Menstruation, for example, is still referred to in medical texts as ridding the body of waste and "debris," while in contrast, "sperm wins accolades for both quantity and continuity of production" (Martin, 2001, p. xxiv). Martin writes,

Medical texts describe menstruation as the "debris" of the uterine lining, the result of necrosis, or death of tissue. The descriptions imply that a system has gone awry, making products of no use, not to specification, unsalable, wasted, scrap. An illustration in a widely used medical text shows menstruation as a chaotic disintegration of form, complementing the many texts that describe it as "ceasing," "dying," "losing," "denuding," "expelling." (Martin, 1991, p. 486)

Martin posits this language perpetuates violence against women, as well as prejudice against those in lesbian or gay relationships who may not exhibit the "productivity" associated with childbearing from heterosexual relationships (Martin, 1991, p. xxvii).

Anne Fausto-Sterling adds, "the premise that women are by nature abnormal and inherently diseased dominates past research on menstruation and menopause" (Fausto-Sterling, 1992, p. 121). Pre-menstrual syndrome, according to Fausto-Sterling, appears in the media as "a medical problem of enormous dimensions" (Fausto-Sterling, 1992, p. 94), "an overwhelming public health problem" (Fausto-Sterling, 1992, p. 94), correlated with family violence, crime, and suicide. Meanwhile, there is little, if any, evidence that so-called "male" hormones like testosterone are linked to aggression (1992, p. 132). These

misconceptions of women's biological functioning echo the comments about rape, the likelihood of pregnancy following rape, and the condescending statements from legislative leaders in states such as Missouri, Arizona, and Virginia during the 2012 War on Women (Camp, 2012).

Intersectionality's conceptual evolution: Crenshaw and Collins

Patricia Hill Collins, a sociologist at the University of Maryland in College Park, furthered Crenshaw's concepts of the oppressiveness experienced by Black women due to their race and gender. Collins's *Black Feminist Thought: Knowledge, Consciousness, and the Politics of Empowerment* (2009) adds to Crenshaw's definition of intersectionality by describing it as the "analysis claiming that systems of race, social class, gender, sexuality, ethnicity, nation, and age form mutually constructing features of social organization, which shape Black women's experiences and, in turn, *are shaped by Black women*" (2009, p. 320) (emphasis added).

Collins labels these overlapping factors of sociological oppression the "matrix of domination." (Collins, 2009, p. 21). She wrote that these forces of oppression combine to define individuals' social identities, and, therefore, are dually capable of enabling empowerment due to a strong sense of self, and of potentially limiting individuals' sense of worth, if their self-definitions are too strongly defined by inequalities. In turn, these defining oppressive forces help to determine how we treat others (Allan, 2006, p. 4). As Collins notably points out—and, which will be relevant to the analysis of *Glamour.com* and *Jezebel.com*—those who are oppressed are also capable themselves of oppressing.

In order to encourage Black women to support and empower each other, Collins suggested they participate in "safe spaces," or small groups in which they discuss their

personal experiences and help each other reject objectification. One could consider *Jezebel.com* in and of itself as a type of “safe space,” in which young feminists who feel oppressed by attacks on their health care access and health care rights can voice their concerns and support each other, especially by openly posting comments to the articles, and by sharing them over social media. The total average number of reader comments per *Jezebel* article for articles in this analysis, for example, was 261—a high number, and one that indicates *Jezebel.com* visitors are comfortable expressing themselves online within the website’s online environment. In contrast, the *Glamour* website, due to its low average number of reader postings, cannot be considered a “safe space” in the same way that *Jezebel.com* can be.

Intersectionality’s conflicts and criticisms

As Allan (2006) outlines, Collins’ writings boldly fly in the face of traditional positivist social science. Instead of objectivity as a requirement for epistemology, Collins strongly felt that it is not necessary or appropriate to be objective and unbiased in research. She terms “connected knowers” (2009, p. 277) as those who have “experienced specific social forces” (Allan, 2008, p. 2), especially oppressive forces like racism and gender bias; this experience, Collins writes, is essential for developing a knowledge base from which intersectional sociological research should spring.

Because racism, sexism, and other forms of social oppression have been personally experienced, this social knowledge is therefore heavily laden with personal values. The objective nature of traditional scientific research is not possible and, Collins would state, not recommended. As an adjunct to her focus on lived experience, she recommended that researchers use “I” and “we” statements in their writing. In other words, Allan writes,

“the author is central to and present in the text” (Allan, 2008, p. 2), a concept directly contradicting the traditionally accepted, objective, unbiased research style of academic writing in which the author deliberately distances him or herself from the topic under study.

This leads to a central criticism of intersectionality research, at least as defined by Collins: Emotions are necessarily drawn into the equation of academic research and related discussions. Sandra Morgen and Anne Fausto-Sterling have been developing their points that women are portrayed unnecessarily and inaccurately as the more “emotional” and often “irrational” gender, while males are depicted as rational. Collins’ focus on the need to include emotion may potentially undermine these efforts.

Leslie McCall highlighted the difficulties of effectively using intersectionality in her 2005 essay, “The Complexity of Intersectionality.” Despite her giving credit to the theory (as mentioned previously), she notes intersectionality is unfortunately quite capable of further fragmenting women’s studies practice, as it draws on interdisciplinary studies (McCall, 2005, p. 1784). The lack of clear methodology for examining the effects of intersectionality is another very significant drawback, and a complaint echoed by numerous feminist-oriented scholars (Davis, 2008; Nash, 2008; Clark, 2012).

McCall details the lack of standardized methodology by detailing intersectionality’s three types of analysis: anticategorical, intercategorical, and intracategorical. The anticategorical approach refuses essentialism and “deconstructs analytical categories” (McCall, 2005, p. 1773), or, in other words, rejects the concept of social categories.

McCall writes,

Social life is considered too irreducibly complex—overflowing with multiple and fluid determinations of both subjects and structures—to make

fixed categories anything but simplifying social fictions that produce inequalities in the process of producing differences (McCall, 2005, p. 1773).

The intercategorical approach, in contrast, focuses on using the very labels rejected by anticategorical research to investigate “changing configurations of inequality along multiple and conflicting dimensions” within a category (McCall, 2005, p. 1773). In other words, it focuses on the fluidly changing, multi-faceted qualities of oppression. The intracategorical approach, on the other hand, focuses on investigating those “...whose identity crosses the boundaries of traditionally constructed groups” (Dill, 2002, as cited in McCall, 2005).

Jennifer Nash of The George Washington University writes that while intersectionality has widespread applicability, that may in itself be its main flaw: The methods in which it is most usefully studied are still not yet well defined, 20 years after Collins brought the term to wider attention. In her 2008 *Feminist Review* essay, “Rethinking Intersectionality,” Nash refers to intersectionality’s “murkiness”—which is a kinder description than Ann Garry’s word choice of “slipperiness” [Garry, 2011, p. 826]).

Nash adds to her critique that intersectionality can treat black women, the foundation of its theoretical approach, “as a unitary and monolithic entity” (Nash, 2008, p. 89). “That is,” she adds, “differences between black women, including class and sexuality, are obscured in the services of presenting ‘black women’ as a category that opposes both ‘whites’ and ‘black men’” (Nash, 2008, pp. 88-89).

Applying intersectionality to health articles in *Jezebel* and *Glamour*

Intersectionality, its controversies aside, can be used to examine the multiple forms of oppression written about in *Glamour.com* and *Jezebel.com*’s health articles in 2012, since

many of these two publications' articles focused on women's bodies being insulted, endangered, and abused (Barry, 2012b; Breslaw, 2012; Dreisbach, 2012); women's socioeconomic status being mocked (Ryan, 2012e); and their race being used as a form of oppression as well (West Savali, 2012).

Intersectionality is therefore the logical theory for analyzing the content and editorial approaches of *Glamour.com* and *Jezebel.com*'s reproductive health articles, which included those that covered many topics that illustrated female—and occasionally male—oppression, including economic oppression, such as a lack of access to health insurance or access to contraception and abortion services, which can have an enormous socioeconomic impact on women's lives (Jones, Darroch, and Henshaw, 2002).

While factors contributing to intersectional oppression commonly include those cited by Collins—gender, socioeconomic status, bodily ability, sexual orientation, and race—are well documented, the specific aspects of oppression due to inadequate health care and reproductive health care access which is specific to women bears exploration. This is yet another layer of oppression in the intersectional matrix related to women's identity and well-being not yet thoroughly explored by academic feminists.

Hypothesis

This thesis's overall goal is to examine the following hypotheses:

H1A: *Glamour.com* will run a greater quantity of health articles than *Jezebel.com*.

Glamour.com was expected to have a greater number of overall health articles compared to *Jezebel*, as it features a "Health & Diet" section. Because polls leading up to the presidential election indicated the race was very close, and because women's health

issues played a crucial role in the election (Kliff, 2012), the ratio of reproductive health articles to health articles was expected to increase from month to month for both websites leading up to the elections in November 2012.

H1B: The number of reproductive health articles as a proportion of total health articles will be significantly greater in *Jezebel* than in *Glamour.com*.

A greater percentage of reproductive health articles in *Jezebel* was expected due to its strongly feminist editorial slant. In contrast, *Glamour.com*, despite the importance and potential health and psychological impact of the War on Women–related events on its young adult readership, was expected to run a significantly lower percentage than *Jezebel*. This was hypothesized in part due to *Glamour*'s reliance on print and online advertisers, who may prefer to not associate their brands with publications that cover controversial topics.

H2: *Glamour.com* will run significantly fewer articles that include individual or collective calls to action than *Jezebel*.

A significant number of articles that include calls to action was expected to be found in *Jezebel.com*, but not *Glamour.com*, despite both publications' self-professed "pro-woman" editorial approaches. Calls to action are tied closely with feminist theory. Including a call to action—such as "contact your congressperson"; "sign the petition"; or "register to vote"—highlights the importance of the topics reported and the need for social change for improved treatment of women, such as the passage of proposed legislation supporting women's health needs, or blockage of laws intended to undermine women's access to reproductive health care. The social media sharing of the articles that contain calls to action may indicate feminist activism, and political or other actions

combating the oppressive intersectional factors faced by U.S. women.

It was expected that the number of calls to action might have been positively affected by the large number of legislative bills and laws intended to restrict women's access to reproductive health care that were proposed throughout 2012, as well as during the previous year—a total of 1,100 provisions were introduced at the state and federal levels during 2011 (Guttmacher Institute Media Center, 2012).

Despite the number of much-publicized criticisms of women such as Sandra Fluke, politicians' misspoken or deliberately bitter spoken blunders, and a barrage of proposed and passed litigation limiting women's reproductive health rights and access, *Glamour.com* was expected to publish a low number of calls to action. This was expected as *Glamour.com* needs to maintain its status as an extremely popular and revenue-generating women's publication, and avoid the risk of losing potential advertising sponsors.

Another way of looking at the predicted calls to action is that *Jezebel.com*'s editor, Jessica Coen, is embodying the actions espoused by feminist theorists such as Patricia Hill Collins and Jennifer Nash on intersectionality and female empowerment: Coen is combating the multifocal oppression of females by males—physical/biological, political, social, verbal, and financial oppression. *Glamour.com*'s editor, Cindy Leive, is less likely to publish online articles featuring calls to action, due to the website's reliance on revenue from advertisers—for both its print and online editions—who may disapprove of blatantly “feminist” messaging that contradicts the publication's focus on improving one's appearance using cosmetics and new fashions, *Glamour.com*'s primary categories of advertisers (Elliott, 2012).

Research questions

In addition to the hypotheses, this thesis explores two research questions: **Will articles in *Jezebel.com* that include a call to action be more likely to be correlated with a high amount of social-media sharing, such as sharing article links on Facebook and commenting posted by readers on the articles' pages?** For RQ1, the volume of social media activity by article was predicted to be greater for those articles that included a call to action. The calls to action were predicted help persuade and influence readers, either consciously or subconsciously, to share online the articles' pro-woman messages with friends, family, and acquaintances.

This thesis also explores the research question: **Will *Jezebel.com* and *Glamour.com* run a large number of articles that cover intersectionality-related topics, including socioeconomic status; race; nationality; religion; bodily ability; violence against women; and homosexuality?** For RQ2, *Jezebel* was expected to run a larger number of articles that pertained to topics affiliated with intersectionality.

METHODS

Methodological summary

This thesis presents a content analysis of health articles, with a focus on reproductive health articles, from *Jezebel.com* and *Glamour.com* from May through October, 2012, with in-depth analysis of a sample of these articles—10 randomly chosen from each month from *Jezebel* and 24 randomly chosen from each month from *Glamour.com*, which are approximately 25 percent of the health articles from each publication. A random-number generator (random.org) was used for the randomization. The sample size and time frame were chosen to provide a broad picture of specific, measurable content trends leading up to the presidential and legislative elections, while keeping the overall number of articles manageable.

A quantitative content analysis was performed. First, a quantification of frequencies was performed on the overall number of health articles, such as those on cardiac health and diabetes—including reproductive health—to determine what percentage of all articles was reproductive health-focused. Then, the total number of articles that included references to terms related to reproductive health and the War on Women (specified in greater detail in the coding sheet, in Methods) was manually coded and calculated using Excel. This was intended to identify which health- and reproductive health–related terms were given the most editorial attention in this timeframe.

Crosstabs analysis (Riffe, Lacy & Fico, 2005, pp. 189-193) was used to determine differences in quantity and the statistical significance between the calls to action and pro-access, anti-access, and neutral quotations and direct paraphrases found in each website.

Inferences were then drawn from this information about the ways in which these publications' coverage of reproductive health and the War on Women may be influencing their readers—and, as an extension, society—as seen through a feminist political theoretical lens.

Explanation of main concepts

The most important terms in this analysis are defined as follows:

“Reproductive health” is defined as physical issues related to women’s reproductive health, including contraception, pregnancy, abortion, breast health including breast cancer screenings and mammograms, well-woman and preventive care, and insurance coverage of health care related to these concerns (National Institutes of Health, 2013). This may also include mental and emotional health.

“Social media” refers to a variety of websites that are used to share links to online news articles, blogs, and photos. Facebook (www.facebook.com) is the most well known, with more than 822 million users worldwide (Wasserman, 2013).

“The War on Women” collectively refers to events related to actions, including legislation, intended to curtail women’s access to reproductive health care, including: Virginia’s ultrasound legislation; the conflict between Susan G. Komen for the Cure and Planned Parenthood regarding the funding of breast cancer screenings; and Georgetown Law School student Sandra Fluke’s lobbying for insurance coverage of contraception. It also includes events intended to redefine terms pertaining to women’s well-being, such as lawmakers’ comments on the definition of rape and the likelihood of pregnancy following rape (ACLU, 2013).

Content analysis

A quantitative content analysis was the ideal type of research to undertake to analyze the messages in reproductive health articles in *Jezebel.com* and *Glamour.com*. A content analysis assisted in the suggestion of statements about the state of health journalism in these two women's online publications, and helped to measure the frequencies and qualities with which the media was covering the political, socioeconomic, and physical oppression related to women's health and women's reproductive health, which affect millions of U.S. women of childbearing age and their families.

This single-subject design content analysis (Creswell, 2009, p. 159) included a quantification of a stratified, randomized sample of these two websites' articles on women's reproductive health; the number and types of calls to action included in the articles and a quantification of intersectional articles from both publications; and a collection of social media statistics from the *Jezebel* articles.

A quantitative content analysis is a logical, relatively efficient, and reliable method of investigating the research questions and attempting to answer the hypotheses. According to Wimmer and Dominick, content analysis is the technique used by about 25 percent of articles published in *Communication Quarterly* between 1971 and 1995 (Wimmer & Dominick, 2011, p. 156). This investigation sought to maximize validity and minimize confounding effects by following widely accepted methods and statistical analysis using Microsoft Excel 2011 for Mac and IBM Statistical Package for the Social Sciences, version 21 for Mac (SPSS).

Part I: Frequency of health article topics

First, a quantification of frequencies was made of the stratified, randomized sample of women's health articles in *Jezebel.com* and *Glamour.com* that were published from May

1 through October 31, 2012. This specific timeframe was chosen because it included the months closest to the November election; six months of articles were focused on to keep the amount of work manageable. (A years' worth of articles originally had been proposed, but given the hundreds of articles published in *Glamour.com*, the 6-month timeframe was used.) The articles related to general health topics, such as diabetes, depression, or insomnia, as well as those relating to reproductive health, such as breast cancer screenings and contraception.

Articles on reproductive health were further categorized as relating to or not relating to the 2012 War on Women (abbreviated in the discussion and Tables as “WOW”). For example, an article on self-exams for breast cancer screening were counted under “Breast Cancer”; those covering restrictions on breast cancer screenings due to Susan G. Komen for the Cure’s cutting funding to Planned Parenthood were listed under “Breast Cancer—War on Women.”

Sample and unit of analysis

To complete this quantification, a search was made on the *Jezebel.com* website by entering the search string “women” + “health” in the search field on the home page (www.jezebel.com). This search was performed on February 10, 2013. A total of 2,858 articles were returned in the search results from the entire online *Jezebel* archive (which includes articles published back to 2007). For the May 2012 to October 2012 date range under analysis, 242 women’s health articles were listed.

The articles in *Glamour.com* were found by entering the same search string—”women” + “health”—in the website’s search field that appears on the middle-left side of the homepage (www.glamour.com). On February 25, 2013, a total of 6,056 articles were

found in the entire *Glamour.com* article archive for this search string; 650 articles were found in the May 2012 through October 2012 timeframe under analysis.

For both *Jezebel* and *Glamour*, several articles that related purely to beauty or purely to political candidates were omitted from analysis. During data analysis, it was found that a few articles in the samples were duplicates; *Glamour's* website, for example, ran an interview with President Obama using two different headlines, though the content of the two articles was identical. These articles were removed from data calculations.

Coding analysis

For each website, the total number of articles on each health topic was calculated as a percentage of total women's health articles, in order to determine which specific topics appeared the most frequently, and therefore were given the most editorial attention. The ratios of reproductive health articles to general health articles for each publication were then calculated. The codebook and coding guidelines in Appendixes A and B were used to complete the frequencies. The dependent variables were the total number of articles and the number of times each reproductive health topic appears in the texts; the independent variables were the websites and the six-month publication timeframe under analysis. Microsoft Excel was used to calculate the frequencies, sums, and ratios of the data; the Statistical Program for the Social Sciences (SPSS) for Mac, version 21, was used for calculations of *chi* squares and analyses of variance.

Part II: Calls to action

To complete a quantification of calls to action, an analysis was made of a randomized selection of a stratified subsample from these websites. Sixty articles from *Jezebel* were used—10 from each month—which equals 24.59 percent of the publication's total health

articles published in the six-month timeframe under analysis. A subsample was used to keep the amount of work manageable, considering that the coding of article topic frequencies required many more weeks of work than predicted. The stratification was designed to give a representative snapshot of articles in the months leading up to the election; one of the *Jezebel* articles was eventually omitted from analysis due to its extreme outlier qualities.

For *Glamour*, 161 articles were analyzed, which equals 26 or 27 articles from each of the 6 months of May through October. This equals 24 percent of the health articles from this time frame. *Glamour*'s articles were omitted from the deeper statistical analysis of calls to action, due to the very low frequency of CTAs found in its articles.

For the *Jezebel* articles, individual calls to action, such as “Find out more about how your insurance covers birth control,” were tallied together with those that encouraged collective action, such as “Vote in the November election to help preserve women’s reproductive rights.” The overall number of calls to action was not as large as expected; as a result, the qualitative nature of the collective calls to action was not compared to that of the individual calls to action, or to CTAs that included both collective and individual CTAs, to keep statistical analysis valid.

It is important to note that the *Glamour* site includes several article links at the end of each online article, likely in an attempt to encourage readers to spend additional time on the website. The majority of these links were for articles on related topics, and this text was therefore not counted among the calls to action. The longer a reader stays on a website, the more likely the site’s advertising department will be able to charge higher rates to advertisers [personal experience, MSN.com, 2006 and 2009]. These article links

featured on *Glamour* appeared to this former online media editor as “click candy,” ostensibly intended to encourage further exploration of the site’s content but actually placed primarily for revenue gain.

Another clarification to note regarding the calls to action is that some of the articles contained text that indirectly encouraged the reader to take action, though not in an explicit way, or, in a way that was not politically motivated. These articles were coded as “quasi” calls to action. Using the SPSS software program, frequency and analysis of variance calculations were made using this CTA data from both publications to determine whether the differences in calls to action were statistically significant.

Part III: Social media sharing

To answer RQ1, the social-sharing data listed at the top of each article in *Jezebel* was recorded and analyzed to measure social media engagement. Social media sharing, for the purposes of this thesis, is defined as using online platforms such as Facebook (www.facebook.com) and Twitter (www.twitter.com) to share links to online articles (Mashable, 2013; Tufts, 2013). The more social shares an article receives, the more likely the potential readership for an article is amplified exponentially. For example, if a *Jezebel* reader shared an article with her 500 other Facebook friends, each of those friends could share the article up to 500 times, and so on. Both *Jezebel*’s and *Glamour*’s websites included icons for social media platforms on each article, to facilitate social sharing.

The stratified sample of 60 reproductive health articles in *Jezebel* was examined. Again, the articles in *Glamour.com* were not included in this analysis, as the overall volume of social media shares and article commenting for its web articles was noticeably lower than that of *Jezebel*. It should be noted that other social media platforms include

Google+ (“Google Plus”); YouTube, for video sharing; and Instagram, for photo sharing, though links to these platforms were featured on neither *Jezebel* nor *Glamour* at the time that this content analysis was performed.

At the time of analysis, *Jezebel*'s articles featured running totals of social-sharing data only for Facebook.com. It also quantified the number of new visitors each article spurred. Data for both these categories was collected. *Jezebel* also features an active online community of readers who post online comments on *Jezebel* articles; the number of reader comments for these articles was also tallied, though they were not analyzed qualitatively.

At the time this analysis was performed, Facebook shares were denoted next to a small Facebook logo to the side of each *Jezebel* article. A small flame symbol denoted “hits,” which indicate the number of times the article has been visited. On *Jezebel*, when a reader hovered over the flame symbol with his or her mouse, a small pop-up window appeared, in which the number of new visitors was listed. This denotes the number of visitors who were new to *Jezebel* who visited the site as a result of finding the article online, which may be—though is not guaranteed to be—a result of social sharing.

The comments written by readers appeared in reverse chronological order below the article body. At the time that data was gathered for this analysis (February through April 2013), the word “Comments” was listed on *Jezebel* immediately to the right of the social-media logo area, and is where each article's total was collected.

It is important to note for this section of the content analysis that social shares are among the most important factors used to determine what sites appear highest on Google search results. They are therefore valuable to websites such as *Glamour* and *Jezebel* from

an advertising perspective. The more social media shares an article receives, greater the likelihood that Google search-engine ranking algorithms will treat the article, and the website in which it appears, as “high-quality” web properties. According to what is currently known about the techniques that Google uses to rank websites, the higher a page ranks on Google’s high-quality ranking algorithm, the greater the chances are that the article will appear near the top of the Google search-results pages (abbreviated as “SERP”) for its particular subject (Google Webmaster Tools, 2013).

For example, if one of *Jezebel*’s articles received 5,000 social shares on Facebook or another social media platform—a very high number—this would signal to Google’s ranking algorithm that the article is important, and should appear near the top of the SERPs. Suppose the *Jezebel* article that received 10,000 social shares was an article on “legitimate rape.” If a person searching with Google entered the term “legitimate rape” for a Google search, it would be likely that the *Jezebel* article on legitimate rape that received a very high number of social-media shares would appear near the top of the SERPs (DeMers, 2012). While many other factors are involved in SERP rankings, at the time this research was conducted, social sharing was considered among the most important determining factors.

Part IV: Frequencies of intersectional topics

Lastly, the articles that included intersectional issues were tallied. This quantification was broken into two parts: First, a tally was made of the articles that included widely recognized intersectional topics including race, socioeconomic status, dis/ability, violence against women, and religion. Second, the tally was made including articles that

featured health access—specifically, women’s access to reproductive health care—which can be considered a form of intersectional oppression.

Reliability

To ensure the results of all aspects of this content analysis were as accurate as possible, several steps were taken to ensure intracoder reliability. Each article was read and its content analyzed at least twice over a time frame of three months. An individual document was created using Microsoft Word 2011 for Mac for each article under analysis, including its headline, author, date of publication, and a cut-and-pasted copy of the full body of the article from the online uniform resource locator, or URL. These records were created in the event that changes in the websites, such as an upgrade or change in content management system, affected the presence or content of the articles under analysis. This was a helpful measure to take, as *Jezebel*’s layout and content changed significantly during the writing of this thesis, in April 2013, indicating a change in content management system and/or software used for its website development—possibly HTML5, which aids development of content for mobile devices such as phones and computer tablets like iPads (Berliner, 2013).

Keeping articles documented in Word format was more efficient than the alternative of saving Portable Document File, or PDF, versions of each article, or than creating copies of each article using SnagIt software, as was originally proposed.

The Word Count function in Microsoft Word was used to calculate each article’s total number of words for another analysis that was undertaken, though ultimately not used in this thesis. This analysis was not undertaken due its complexity, and a lack of intercoder reliability in the quantifications of quotations and paraphrases and their affiliations with

“pro-woman” and “anti-woman” sources. (This exploration had also been a part of the original proposal for this thesis.)

Pilot study: Intercoder reliability

As part of the pilot study conducted for this research, reliability tests were performed on the general topic frequencies, using three journalism graduate student volunteers from geographically varied areas of the country. It should be noted these weren't true intercoder tests; the students' individual coding was compared to mine, not each other's.

Two students were able to complete the frequency coding of 12 articles each. The agreement between the students' coding of the primary topic of the *Glamour* articles and myself was 11/12 for the first student (one article was not coded). For the second student, results were 12/12, for an average of 91.67%. When the not-coded article is omitted from the average, the coding reliability average of *Glamour* article topics was 100%.

Jezebel's results from this pilot study were not as accurate, however, which led to needed improvements in the coding documents. For example, “Rape” and “Violence Against Women” needed to be called out more clearly as separate categories. Also, “Stress” needed to be delineated as a health concern of less medical severity than “anxiety,” which fell under the “mental illness” category. For one of the volunteer coders, 9 out of 10 primary topics for *Jezebel* aligned; the categorization of the one article for which coding did not agree was close, with “Reproductive Health” being the topic of choice by the volunteer coder, and “Birth Control” being my specified topic.

For the other two articles, the volunteer coder, a female health journalist, listed three or four total topic possibilities, though primary topics were requested for the pilot study coding. For example, one article about women and anxiety that I coded as “Mental

Health,” she coded as “Happiness,” “Mental Health,” and “Stress,” making it difficult to pinpoint the primary topic for the sake of reliability testing.

For the other volunteer coder, a male who works in advertising and who admitted to not being an expert on health topics, 9 out of 12 *Jezebel* articles aligned. The coding on the non-matching articles was very close, however; for example, he coded an article as “fertility” which I believe would be more accurately coded as “birth control.”

Having 38 topics to choose from among an alphabetized list on unfamiliar topics clearly presented a challenge. The overall average from this pilot study was 41/46, or .89, and very close to 90% accuracy, despite deficiencies in the coding guide and a lack of extensive health literacy on the part of one of the coders.

While Holsti’s coefficient was unable to be calculated from these results (each volunteer was sent a different set of articles, not the same articles), the overall accuracy was greater than 95%. Neuendorf states that a calculated reliability coefficient “of .90 is nearly always acceptable” for nominal data, based off Holsti’s reliability formula first reported in 1969 (Neuendorf, 2002, as cited in Wimmer and Dominic, 2006, pp. 169). Due to time constraints, the intercoder reliability testing was not repeated.

Intracoder reliability

Intracoder reliability was addressed through two recounts of the articles’ content. While the accuracy of intracoder accuracy was regrettably not recorded or calculated for this research, there were only very infrequent, minor discrepancies in the recorded frequencies; these were attributed to the manual tallying of results into Microsoft Excel, which were rectified before SPSS calculations were run.

Also in an effort to help ensure reliability, the number of social media shares and comments from the 60 *Jezebel* articles analyzed in depth was captured on the same day, to help reduce any potential disparity in the totals. (If social media shares were not recorded on the same day, some articles could have benefited from the additional days' worth of reader traffic.) Because some of these articles were nearly year old at the time of capture, however, this risk was slim. Articles on some politicians and reproductive health topics that were continuing to appear in the news in 2013 may have linked to some of these older, related articles, however; additional commenting and social media sharing was unlikely, though still possible.

Validity

This study sought to attain construct validity by adequately defining the terms being measured (Creswell, p. 228; Schutt, p. 134). Many potential threats to validity may be present in this study, including internal validity threats such as history and selection (Creswell, p. 163). History as an internal validity threat is of particular concern, as frequent mentions of the War on Women may have desensitized media consumers and media editors to the very issues being studied in this research. The selection of websites may also be a source of validity issues.

An additional threat to the validity of this content analysis is the possibility that the articles in the websites may have been designed with dynamic rendering, especially considering the increasingly popular use of the coding language HTML5 (Marcotte, 2010). In other words, both *Jezebel.com* and *Glamour.com* may have been capable of adjusting search results to cater to their computer cookies' records of a laptop's search-topic history. Dynamic search results and dynamic web sites can be created when

websites record the Internet Protocol, or IP, address of a visitor's computer and then combine this information with web analytics technology to render search results unique to each user. These customized results are thought to increase the targeting and effectiveness of website advertising. Because Gawker is a for-profit media company, there is a greater likelihood that *Jezebel's* search results were targeted.

By searching multiple times on these websites using the search terms "women" + "health," and by using the same laptop for all searches, the risk may have been raised that the search results showed a customized set of results based on my laptop's unique search history. While there is no absolute proof that dynamic searches affected this study, better sampling accuracy in any future research could be supported by varying the computers used to obtain the samples under analysis, including switching between Apple and PC hardware, frequently clearing the computer's cached history, and then verifying that the results were identical.

RESULTS

Part I: Frequencies of health and reproductive health article topics

The first step in analysis was a quantification of frequencies of health and reproductive health topics to help determine what differences existed in *Jezebel.com* and *Glamour.com*'s health articles from May through October 2012. The alpha level used in all *chi*-square and statistical tests was .05; all statistical tests in Part 1 were 2 x 2 analysis with $N = 890$. In all analyses, reproductive health subjects that mentioned War on Women–related issues were marked with the abbreviation WOW; reproductive health articles that did not mention War on Women-related issues were marked NWOW. For all results, tables are listed in Appendix C.

H1A stated that *Glamour* would run a greater quantity of health articles than *Jezebel*. This hypothesis was partially supported. Articles on fitness, food, nutrition, weight and recipes appeared in a greater number in *Glamour* to a degree that was strongly statistically significant. For Fitness articles, *Glamour* featured 94.0% of articles, $\chi^2(1, n = 78) = 20.716, p = .000$. *Glamour.com* published 72.8% of Food articles, $\chi^2(1, n = 124) = 48.603, p = .000$. For Nutrition, *Glamour*'s editorial coverage significantly exceeded *Jezebel*'s, $\chi^2(1, n = 37) = 12.094, p = .000$, as it did to a very strong degree for Recipes, $\chi^2(1, n = 92) = 38.319, p = .000$. Weight was also significantly different, again with a majority of articles running in *Glamour*: $\chi^2(1, n = 85) = 5.553, p = .018$.

A few article topics not pertaining to appearance or reproductive health reached significance, including Happiness. Happiness was strongly significant with *Glamour* exceeding *Jezebel*, $\chi^2(1, n = 32) = 12.396, p = .000$. The number of articles on Insomnia

was close to significance, with a greater number of articles running in *Glamour* for both topics: $\chi^2(1, n = 20) = 2.387, p = .156$. For Mental Health, there was not a significant difference, $\chi^2(1, n = 17) = .229, p = .792$.

One of the reproductive health topics showing a clearly statistically significant difference between the websites was abortion. The NWOW-related Abortion analysis showed 100% of articles appeared in *Jezebel*, $\chi^2(1, n = 6) = 16.175, p = .000$. For WOW-related abortion articles, $\chi^2(1, n = 61) = 161.640, p = .000$; 95.3% of articles appeared in *Jezebel*. Differences in WOW Planned Parenthood and WOW Rape articles were also strongly different, with more articles appearing in *Jezebel*. For Planned Parenthood, $\chi^2(1, n = 13) = 30.980, p = .000$, and ($n = 1$ for *Glamour*); for WOW Rape, $\chi^2(1, n = 16) = 43.627, p = .000$.

For WOW-related Birth Control articles, a significantly higher number of articles appeared in *Jezebel*, or 89% of the total for this category: $\chi^2(1, n = 25) = 56.304, p = .000$. The same number of non-WOW birth control articles appeared in the two publications, with the differences between publications very closely approaching statistical significance, $\chi^2(1, n = 7) = 3.738, p = .068$. The NWOW Pregnancy category was not significantly different, with more articles appearing in *Glamour*: $\chi^2(1, n = 18) = .009, p = 1.000$ (for *Jezebel*, $n = 7$); though the WOW Pregnancy articles were significantly different, with 7 times more articles appearing in *Jezebel*: $\chi^2(1, n = 7) = 14.831, p = .000$. NWOW Breast Cancer coverage was not significant, though *Glamour* featured more articles $\chi^2(1, n = 19) = .084, p = .826$ (for *Jezebel*, $n = 8$). For WOW Breast Cancer articles, the results were also not significantly different, though *Glamour*

once again ran more articles on the topic $\chi^2(1, n = 19) = 1.145, p = .349$ (for *Jezebel*, $n = 4$).

An even split of 50% of WOW-related Insurance articles appeared in *Jezebel* and *Glamour* ($n = 12$ for each). Due to the smaller overall quantity of articles in *Jezebel*'s overall sample ($N = 242$) compared to that of *Glamour* ($N = 648$), the *chi*-square analysis indicates *Jezebel* dedicated significantly greater editorial attention to this topic than *Glamour*: $\chi^2(1, n = 12) = 6.482, p = .018$. Many of these articles pertained to corporations challenging the PPACA's mandate for insurance coverage for birth control.

The quantifications of health article topics by website are summarized in Table 1, and topics as ratios of total health articles appear in Table 2.

H1B stated that *Jezebel.com* would cover more reproductive health and War on Women–related reproductive health articles than *Glamour.com*. This hypothesis was very strongly supported. When the total number of reproductive health topics and War on Women-related reproductive health topics are combined, the differences between these publications' attention—or lack of attention—to coverage of subjects including contraception, STDs, breast cancer screening, rape, and violence against women is apparent, as seen in Table 3. More than one-fourth of *Jezebel*'s articles, 26.85%, pertained to general reproductive health topics (those not related to the War on Women). This was more than twice the percentage of those appearing in *Glamour* (11.27%).

Totaling the reproductive health and War on Women–related reproductive health articles shows a clear difference between the two websites. In *Jezebel*, 67.34% of the reproductive health articles that were sampled related to the War on Women, close to thirteen times the 5.23% in *Glamour*, as shown in Table 4.

As seen in Table 5, nearly all of *Jezebel*'s health articles, 96.28%, pertained to reproductive health. Nearly 1 in 4 of *Jezebel*'s health articles focused on the controversial topic of abortion, while a large percentage of its article total, 67.34%, covered War on Women–related health topics. *Glamour*, in contrast, showed a much lower total of reproductive health articles (16.84%) (of which a minority [5.23%] were categorized as relating to the War on Women). Because there were numerous statistically significant differences between the publications, the null hypotheses for H1 and H2 were rejected.

Part II: Calls to action and cross-tab analysis

The second hypothesis (H2)'s prediction that a greater number of CTAs would be found in *Jezebel* was very strongly supported, and the null hypothesis of no difference between the two groups was rejected. H2 predicted a difference in the frequency in the use of calls to action (CTAs) in a stratified subsample of these websites ($n = 59$ for *Jezebel* and $n = 161$ for *Glamour*). Calls to action were described as being present, not present, or present in a less-than-emphatic way, which was termed a “quasi” call to action. As seen in Table 6, the cross-tabulation of calls to action showed that the total number in *Jezebel* ($n = 14$) was larger than the total number of calls to action *Glamour.com* ($n = 11$). Because the sample of *Jezebel* articles totaled less than half the number of *Glamour* articles, these totals were statistically significant, $X^2 = 26.154$ (2; $n = 14$) $p = 0.00$.

Part IIIA: Social media sharing--Univariate analysis of variance

Research Question 1 (RQ1) related to the same subsample of *Jezebel.com* articles from Part II, and asked whether these articles' calls to action were associated with a greater volume of reader engagement. Engagement for this measurement was measured

by the number of reader “hits,” or number of times the articles were read; and by social media sharing (measured by the quantity of Facebook.com shares, new visitors, and total comments). Facebook shares of more than 1,000 were rounded to the nearest hundred, as this is the standard display of Facebook share figures used by *Jezebel* and other popular websites. Tables 7, 8, and 9 show the quantification of these social media statistics. One article was omitted from the calculations, as it was an outlier with 10 times more hits than the other articles ($n = 59$). This article covered the controversial rape comments made by Todd Akin (Moore, 2012; Naylor, 2012).

Univariate analyses of variance were run for each of these four categories, with Tukey post-hoc treatments. Hits, or the number of times readers clicked on or read an article, were strongly significant, $F(2, 56) = 2.62, p = .082$. For Facebook sharing and New Visitors, the analysis of variance showed that the respective effects of calls to action were not significant, $F(2, 56) = 1.54, p = .224$, and $F(2, 56) = 1.64, p = .204$, respectively. For Comments, the results were not significant, $F(2, 56) = 1.11, p = .336$. These results, while not as strong as hoped, indicate Research Question 1 was partially supported: Though the results were not statistically significant, articles with calls to action did show a greater likelihood of being read by the site’s visitors. This indicates calls to action in health articles bear additional research: while they may not have been shared socially in a direct way from the *Jezebel* site, the greater number of hits indicate they may have been shared by readers cutting and pasting the articles’ paths and sharing them via email or text messaging.

Part IIIB: Social media sharing and calls to action

The mean Facebook shares of the articles that included a CTA was 2,728; it was 791 for those that did not include one. The new visitors and comments were also disproportionate, with a mean of 8,666 new visitors for articles with CTAs, compared to 4,062 for those without. The mean number of comments for articles containing a CTA was 262, and 179 for those that did not. Articles with a quasi-CTA were also significantly less than those with a CTA, with just 167 comments on average for these articles, as seen in Table 9.

The mean number of hits per article was relatively high in those without a CTA ($n = 27,858$), but this may be due to an outlier article that featured former Missouri Representative Todd Akin. This article garnered 10 times the typical hits of other *Jezebel* articles ($n = 149,823$). This article's popularity was perhaps due to the sheer controversy surrounding Akin's statements, but may have been due to popular outside websites linking to the article, especially sites with a very high number of daily visitors, such as Huffington Post (www.huffingtonpost.com). Nevertheless, the number of hits for articles containing a call to action was significantly higher ($n = 46,865$). This article was removed from the SPSS analysis to prevent skewing of results.

Part IV: Frequencies of intersectional topics

Lastly, a quantification was made of the stratified subsample of *Jezebel* and *Glamour* articles to determine how frequently the articles covered intersectional topics, including race, sexual orientation, and socioeconomic status. Research Question 2 (RQ2) inquired whether *Jezebel* and *Glamour* ran a large number of articles on intersectionality-related topics. Research Question 2 was answered affirmatively for *Jezebel*, and negatively for *Glamour*.

The total number of articles in *Glamour* was 12 and the total in *Jezebel* was 64. As a percentage of articles sampled, 1.9% of *Glamour* articles covered intersectional topics, while 26.4% of *Jezebel*'s did, or more than a 12-fold difference. If restriction to access to reproductive health care is added to the list of intersectional factors, however, then the totals change to 27 and 157 in *Glamour* and *Jezebel*, respectively. This equals to 4.2% of *Glamour*'s total articles and 64.9% of *Jezebel* total articles making reference to intersectional topics. (See Table 10.)

The intersectional topics covered most often related to violence against women, a topic that *Jezebel* staff writer Lindy West in particular focused on throughout 2012. *Jezebel* writer Katie J. M. Baker wrote a highly critical in-depth feature of Missoula, Montana, in "My Weekend in America's So-Called 'Rape Capital'" (Baker, 2012b). The monetary costs of birth control and legislation proposed to further cut women's health care access was another frequent topic in the articles that included intersectional topics ("Paul Ryan Sponsored a Bill That Would Allow Rapists to Prevent their Victims from Aborting," in *Jezebel* [Ryan, 2012c]; "New Laws to Disenfranchise Female Voters" in *Glamour* [Florsheim, 2012]). Socioeconomic status was another frequently cited intersectional topic ("Where You Live May Say THIS About Your Health," in *Glamour* [Petronis, October 15, 2012]). *Glamour* was more likely than *Jezebel* to cover issues relating to disability, such as in "This Little Girl Has Down Syndrome, and She's A Swimsuit Model!" (Jio, July 27, 2012).

DISCUSSION

Part I: Health topic frequencies

Jezebel and *Glamour* are two of the most popular U.S. websites targeting women ages 18 to 25. In the 2012 timeframe during which this research was conducted, however, their coverage of women's health was markedly different. This content analysis showed more than 9 in 10 of *Jezebel*'s health articles focused on reproductive health, a full 25 percent of which focused on abortion. *Glamour*, whose print edition is found in 1 in 10 U.S. homes (Lulofs, 2012), devoted its health-related editorial space primarily to covering dieting and fitness, and predominantly how these pursuits can affect women's appearance. Only 16.84 percent of *Glamour*'s health articles pertained to women's reproductive health, supporting Hypothesis 1.

Interestingly, the reproductive health articles run in *Jezebel* were primarily election- and health insurance-focused, echoing the lack of women's health care coverage in the media that existed back in the 1970s. While it may be seen as discouraging from a feminist perspective that women's rights were so strongly and frequently threatened in 2012, *Jezebel*'s coverage may be interpreted as encouraging to those who support women's abortion rights. The most frequently mentioned women's health topic in *Jezebel* was abortion, a controversial topic that *Jezebel*'s editorial staff is not reluctant to spotlight. It indicates a mainstream publication with tens of millions of visitors each month—thousands of whom enthusiastically and positively share article links on their social media accounts—was giving significant editorial attention to women's

reproductive health, including threats to abortion access, instead of avoiding it, as many mainstream women's magazines do.

Jezebel was also raising awareness of the importance of reproductive health as a pivotal issue in the fall election by highlighting many politicians' shock-generating comments about contraception, rape, and abortion, such as the "legitimate rape" comments made by Todd Akin. *Jezebel*'s writers also covered—in multiple articles, by multiple writers—women's rights issues, including Sandra Fluke's testimony about health and subsequent public mocking by Rush Limbaugh, as well as the strict legislation and restrictions in multiple states that aimed to make it harder or impossible for abortion clinics to operate.

Jezebel's rising visitor traffic throughout 2012 (which continued into 2013 as this thesis was written) indicates that the site was achieving greater popularity as it continued to focus on reproductive health and abortion coverage, possibly due to the importance of reproductive freedom to its young audience—especially with the then-upcoming election. On the other hand, this rise in audience size may have had nothing to do at all with the reproductive health coverage, and instead been to any number of factors, such as advertisements for and links to *Jezebel* on the other highly trafficked Gawker media sites, or because *Jezebel* was successful in having articles featured on popular sites like HuffingtonPost.com.

While pinpointing the reasons behind the site's increase in page views and audience and determining the specific effects of its coverage of reproductive health on its readers is beyond the scope of this thesis, it is important to note that the number of health articles in *Jezebel* that covered reproductive health, and abortion specifically, was extremely high—

close to 100%.

In contrast, when reproductive health articles were analyzed as a percentage of overall health articles, *Glamour* gave one-sixth as much editorial attention to reproductive health as *Jezebel*. The difference in health topic coverage between the two publications is even more pronounced when *Jezebel*'s weight-related articles are reviewed in comparison to *Glamour*'s. *Jezebel*'s articles criticized U.S. society's preoccupation with women's weight. Its articles also focused more frequently than *Glamour*'s on scientific research, including a study that highlighted racial disparities in weight loss efforts, which was covered by both websites (Davies, 2012; Murdoch, 2012b). *Jezebel*'s slant was geared more toward combating social pressure to be slim, and its reporters expressed incredulity at the lengths some young women have taken to appear thin (such as "Teen Girls Are Wearing Shapewear to 'Normalize' Their Bodies" [Davies, 2012]).

The health articles in *Glamour.com*, in contrast, primarily discussed foods that readers should avoid eating in order to maintain health and prevent weight gain. *Glamour*'s articles predominantly encouraged readers to get in shape, lose weight (or maintain their figure if it is already slim), and eat low-calorie foods. Article titles included, "A Skinnier Way to Enjoy Beer," (Jio, 2012a), and "Experts Say Anyone Can Lose Weight on a 1,200-Calorie-a-Day Diet" (Jio, 2012b).

There are likely multiple reasons behind *Glamour*'s focus on diet and weight loss, including reader expectations and advertiser revenue. While the details behind the reasons for this focus is out of the scope of this thesis, this preoccupation of *Glamour* to give such prevalent editorial attention to women's weight and diet issues could be seen in and of itself as a force in the intersectional matrix of oppression of women. While it is

true that maintaining a healthy weight may help prevent diabetes, cancer, stroke, and other health issues, the *Glamour* articles' titles, content, accompanying visuals, and the way they were teased on the *Glamour* website focused much more on diet and losing weight as tools for improving one's overall and especially sexual attractiveness.

The potential for 'issue fatigue'

The frequencies of certain topics in these publications' articles may have had effects not measured by this research, but that are worthy of consideration, especially for future research. *Jezebel*'s focus on reproductive health, especially access to abortion, may have had a negative effect on its audience's attentiveness and loyalty. It is possible the content's focus on the extremely restrictive laws in Arizona, Virginia, Michigan, Mississippi, and other states may have led to what is variously termed "issue fatigue," "battle fatigue," or "feminist burnout" (Huntsman, 2013; Valenti, 2013).

A media overload of negative news, especially relating to a sensitive health topic associated with women's oppression, can be difficult to process, especially week after week, as is illustrated—if sardonically—by the *Jezebel* article, "Rape Fatigue and You: When There Is Just No Anger Left," by Erin Gloria Ryan, (Ryan, 2012b). Since *Jezebel*'s editors have stated that they hope to raise awareness of women's issues, this could mean their editorial efforts backfired.

As Emily Gould wrote in "Outrage World: How Feminist Blogs Like *Jezebel* Gin Up Page Views by Exploiting Women's Worst Tendencies" in *Slate.com*, "the easiest way for *Jezebel* writers to be provocative is to stoke readers' insecurities" (Gould, 2012). By repeatedly covering the topic of threatened reproductive rights, *Jezebel* was likely primarily aiming to raise the level of concern (or even anxiety) in its feminist readership

for their reproductive health rights. One can assume this may have had the secondary effect of prompting its pro-woman and pro-choice readers to head to the polls in November to support candidates who stated their support for women's contraceptive and abortion rights—what could be called a positive effect by *Jezebel's* editors and its readers who support women's reproductive rights. This frequent coverage of abortion, though, if it did have an “issue fatigue” effect, ironically could be considered a form of intersectional oppression by itself, by serving as a very frequent reminder to *Jezebel* readers just how severely their rights were at risk.

Topics covered by neither *Jezebel* nor *Glamour*

The health topics covered by neither *Jezebel* nor *Glamour* also bear discussion. According to the *chi* square analysis of more than 30 health topics, neither website gave much attention, or omitted coverage altogether, of several subjects ranked by major news outlets as the most important health issues of 2012. These topics include the West Nile virus outbreak and the ban on large-sized sugary sodas in New York City, which was proposed by Mayor Michael Bloomberg to combat diabetes and related health issues (Hayes, 2012; Health.com, 2012). Additional topics notably not given editorial coverage by these two websites, but covered widely by other news outlets, include advances in cardiac disease diagnosis for women, and increasing concerns about prescription drug risks and side effects, including for those that treat osteoporosis.

Some of these major health news stories, such as the West Nile outbreak and the soda debate, affect a broad audience and aren't necessarily of focused interest to *Jezebel* or *Glamour's* readership. The light coverage or altogether absent coverage, however, of subjects such as the cardiac health and osteoporosis news is notable. Osteoporosis is a

major health issue for older women that is believed to be preventable, at least in part, if young women—that is, *Jezebel* and *Glamour*'s target audience—follow a proper diet and engage in weight-bearing exercise (National Women's Health Network, 2012). Cardiac disease is the leading cause of death among women, and atherosclerosis and heart attacks in women are often misdiagnosed and mistreated, often due to physicians' lack of awareness of cardiac symptoms specific to women as well as a lack of medical research on women (Bailey Merz, 2012). As Dr. Noel Bailey Merz stated, "Diagnostic and therapeutic strategies [for heart disease], which had been developed in men, by men, for men, [aren't] working so well for women" (Bailey Merz, 2012). Both *Glamour.com* and *Jezebel.com* could have appealed to their young, predominantly female readership by highlighting these gender inequities in medical research and treatment.

Other health topics whose article quantifications were extremely low include several important health topics that affect women's well-being and longevity. They include addiction; alcohol; blood pressure; cancer (non-reproductive); cholesterol; depression; diabetes; eating disorders; osteoporosis; skin health and skin cancer (the cancer diagnosis most greatly increasing in frequency among young women in the U.S.); and violence against women. Other important topics that appeared at low frequencies included aging; breastfeeding; colds and flu; doctors; energy levels; medication; menstruation; and rape (non-War on Women-related). It can be argued that both *Jezebel.com* and *Glamour.com* were committing a disservice to their readership by omitting coverage of these important health topics that can have a lasting impact on their young readers' short- and long-term physical and mental wellness.

Part II: Calls to action

These two publications' frequencies of calls to action were also very different. Only 11 of the *Glamour.com* articles in the subsample examined included a call to action—a total of 6.88%. Just one of these articles pertained to reproductive health, for an unexpectedly low total of 0.90%. This indicates H2 was strongly supported.

The breakout of the topics affiliated with these calls to action reveal a great deal about *Glamour's* editorial focus. Out of these 11 articles, 2 included calls to action regarding protecting oneself against communicable diseases; 2 recommended that readers go visit their doctor or dentist if exhibiting specific health symptoms; 2 recommended a workout; and 3 advised readers to eat specific foods for health benefits. The one article that pertained to reproductive health urged readers to watch a video pertaining to the latest recommendations in breast cancer self-exam techniques (Petronis, 2012a). Unlike several of *Jezebel's* calls to action, this was a low-level call to action, encouraging activity at the level of the individual instead of broader, group-based political activism, such as voting for candidates who vowed to support women's health.

Glamour's extremely low total of calls to action contradicts its editorial mission and its self-publicized identity as a publication that supports women's well-being. The low number of calls to action was especially surprising given *Glamour's* past coverage of controversial political topics, such as with its much-promoted Women of the Year awards mentioned previously, and the controversial topics covered in many of its National Magazine Award–winning features.

This minimal number of calls to action was lower than anticipated; past research on calls to action in health articles was used as a benchmark, and the quantity of calls to action was predicted to be higher in 2012, considering the severe restrictions being

proposed against women's health care access that appeared in the media day after day, in state after state. Hinnant's research of women's print magazines (2009), for example, which included coverage of *Glamour*, also showed a low overall percentage of articles with feminist-oriented calls to action. Given the popularity of social media, it was expected that calls to action would appear more often within articles, as a way to influence the social-media sharing of these features.

A greater number of *Glamour.com* calls to action than what was quantified in this study was expected for two reasons: One, the media in 2012 was saturated with articles about health insurance, health care, women's health coverage, and the presidential candidates' stances on these topics. Two, the online magazine platform is a much less confining medium than printed magazines. With hundreds of health articles published in the six-month timeframe under analysis—and thousands of articles overall added to *Glamour.com*—a much higher number of calls to action was expected. This would have aligned with an indication that feminist activism is stronger than it was in around the time of the 2008 election, when women's health was not as threatened as it was in 2012.

It was not surprising that *Jezebel* featured a much higher number of calls to action. *Jezebel* is known for a strongly opinionated writing style and tone and for its staff writers being vocally devoted to raising awareness of feminist causes. Many of *Jezebel*'s writers regularly engage in heated debates about female oppression on Twitter (West, 2013a), as well as within the articles' online comment forums.

Lindy West is arguably the most outspoken of *Jezebel*'s writers, and was awarded the 2013 Women's Media Center Social Media Award for her bold commentaries on rape; she herself received rape threats on Twitter many times over the past several years

(Women's Media Center Press Center, 2013).

Examples of calls to action in *Jezebel*

When analyzing calls to action, it was expected that some of these articles' calls to action would encourage readers to vote; to talk to their doctor, or at the very least, to discuss these issues among their peers to become better informed about health issues. Health articles examined in past content analyses in the literature have included calls to action suggesting that readers contact drug manufacturers for more information, and/or encouraged activism by listing contact information for readers to reach out to their legislative representatives. For example, as was emphasized in Barbara Barnett's "Health as Women's Work: A Pilot Study on How Women's Magazines Frame Medical News and Femininity" (Barnett, 2009), *Latina* magazine listed a toll-free 800 number and web site address for readers to call for more information about mifepristone, the medical abortion pill, when that medication was first released to the marketplace. *Ladies' Home Journal* also encouraged women to reach out for more information, for example, by pointedly asking their doctors about heart disease (Leader & Sciammoacco, 2001, as quoted in Barnett, 2009).

Calls to action found in *Jezebel*'s articles, however, did not frequently encourage this type of information seeking. Rather, many of their calls to action were emotional in nature, encouraging readers to embrace any feelings of dissatisfaction and discontent (or, as Gloria Jean Ryan wrote, "rage") about the health care restrictions the website reported on and which they were reading about.

Many calls to action were not direct calls to action, but were rather obtuse in nature. For example, in Doug Barry's article on female boxers, "Female Boxers May Have a

Slightly Lower Risk of Cognitive Damage,” he concludes with the following thought that could not be coded as a straightforward full-fledged CTA, but rather a “quasi” CTA:

It’s tempting to celebrate the inclusion of women’s boxing in this year’s games, but, as the evidence pointing to long-term head injury from contact sports piles up, *we might want to consider if adding yet another iteration of boxing to the Olympics is really something to applaud.*” (Barry, 2012a, emphasis added)

Another instance of a “quasi” CTA appears in “Indian Women Fight for the Right to Pee,” a profile of how females in India have few hygienic restroom facilities. Author Katie J. M. Baker wrote,

“...Indian women have recently been forced to mobilize in hopes of putting an end to a sexist double standard: in many cities, men pee gratis while women have to pay to wait in line for a limited number of toilets.” (Baker, 2012a)

The article continues by describing the often filthy and inadequate facilities available to women in India. Baker concludes her article with the following call to action: She tells readers that the next time they use a restroom, they should remember, “While you’re in there, remember how lucky you are, even if you’re out of toilet paper” (Baker, 2012a). While this is not a call to action encouraging readers to seek information, or to engage in pro-health or politically oriented actions, it is directly addressing the reader to do take action after reading the article—even if, in this case, it’s more of an emotional call to action geared around a feeling of despondency or guilt.

Another “quasi” call to action recommended, in a sardonic tone, that readers allow men to make reproductive health decisions for them. This particular article covered the Michigan legislative session (mentioned in the Introduction) in which Representative Lisa Brown was banned from speaking on the house floor after using the word “vagina” during abortion-related debates. *Jezebel* writer Erin Gloria Ryan ended the article with

sarcastic advice of, “Let this be a lesson to you, women: shut up and let men do all the deciding about your bodies” (Ryan, 2012d). Again, the tone is sarcastic and the call to action obtuse, but with a subtext that clearly communicates that the situation is unacceptable. (In this way, *Jezebel* differs greatly from *Glamour*, in that the latter takes a much more traditional journalistic approach to its reporting.)

Part III: Social media sharing

The social media sharing is also an important implicating factor in intersectionality and feminist theory. By sharing news related to health and reproductive health, *Jezebel* readers were participating in what Collins would call a “safe space,” or reinforcing their identities as women concerned with their health, and as oppressed citizens (Collins, 2008). *Jezebel* readers were also spreading awareness of these issues, and perhaps also raising the possibility that their friends would take actions in opposition to news of restrictions on women’s health care, such as by contacting their legislators, or by voting for candidates and referendums that support women’s health care access and women’s reproductive health rights.

While a quick glance at the data showed that articles containing calls to action showed a much higher number of Facebook shares and new visitors than those that did not include a CTA, or that included a “quasi” CTA, the small overall sample of articles containing CTAs prevented the data from reaching statistical significance. Research Question 1 therefore cannot be answered with statistical certainty, though the results indicate the topic bears additional research.

Numerous possible explanations exist for the disparity seen in social media sharing between *Jezebel* and *Glamour*. Perhaps *Glamour.com* did not add social media sharing

capabilities to its articles until partway through the year. Possibly, the site's readers were reluctant to participate in social media sharing, as only a small number of other readers were participating regularly, making new participants wary of joining in. Additionally, it is feasible that the private and sensitive nature of many of the health article topics prevented readers from using the social media sharing capabilities.

While *Jezebel's* articles showed a great deal of social media sharing, some articles' numbers were dramatically lower than others, even on popular topics, and warrant exploration. Several explanations are possible. One, the editors may have neglected to enable the social media sharing functionality of the articles when publishing the articles using the site's content management system. Two, the links may have been active, but might have had coding errors that caused them to not function correctly; this is unfortunately very easy to do with HTML and JavaScript code (MSN.com and Amazon.com personal experience, 2005–2011). Third, if a discussion was veering into unacceptable, even libelous, territory, the editors may have turned off the comments functionality at any point after publishing the articles, to protect the website from potential legal action or from offending readers. Fourth, the articles simply may not have been as popular or as "shareable" as others, either due to personal preferences of the readership, or due to reader burnout as previously described. Readers who choose to share an article on rape on Facebook, for example, may intend to show support for rape awareness or prevention, but instead would awkwardly appear to "Like" the topic, due to the inflexible nature of Facebook's current sharing functionality.

While the subsample of articles with CTAs showed higher social media sharing measurements, the lack of true statistical significance was disappointing. If time had

permitted, returning to the full starting sample of 242 *Jezebel* articles or enlarging the sample further to analyze the entire year's worth of health articles would have been helpful to increase the sample size. This exercise would be worthy of further study, as would comparisons of social media sharing trends in *Jezebel* during previous years, especially 2011, when many laws were passed to restrict women's health access.

Websites will likely continue to use social media as a platform for increasing traffic and therefore ad revenue. Analyzing calls to action in either *Glamour* or *Jezebel* for 2013 and into the future and making inferences regarding CTAs and their influence on social media sharing could have value to online media editors and reporters who continue to search for revenue streams to support their work—as well as politicians running for office.

Part IV: Intersectional topics

Neither *Jezebel* nor *Glamour* showed much of a wide-angle lens on the intersectional issues of race, sexual orientation, socioeconomic status, and disability, or issues that pertain to women internationally. Out of the 889 total health articles surveyed for this thesis, only 12 in *Glamour.com* and 64 in *Jezebel.com* covered issues that are considered intersectional forces of oppression, such as race (such as “The Connection Between Risky Sex and Neighborhood Violence,” in *Jezebel*); cultural or religious oppression, such as that in Ireland and India (“First-Ever Abortion Clinic in Ireland to Open Next Week,” and “Indian Women Fight for the Right to Pee,” both in *Jezebel*); or dis/abilities (“The Little Girl with the Magic Arms,” in *Glamour*) [Baker, 2012c; Morrissey, 2012; Baker, 2012a; Petronis, 2012c].

The sample was then analyzed again, this time including restrictions on women's health as an intersectional force (alongside socioeconomic status, race, dis/ability, and other intersectional categories). The number and percentage of articles that contained coverage of intersectional forces increased greatly, to 27 in *Glamour.com* and 157 in *Jezebel*. The total number of articles was still quite small in *Glamour*, but the percentage of articles covering intersectional topics doubled, to 4.2%. For *Jezebel's*, its 157 articles brought its percentage of articles covering intersectional topics to 64.9%. (Note that some articles were counted twice, if they covered both health-care access and race, for example. Four articles in *Glamour* were counted twice, and 18 were for *Jezebel*.)

Because access to health care directly affects women's socioeconomic status and a lack of which can even be life threatening, it may be argued that health care access ought to be considered as one of the many forces of intersectional oppression—or at least one that can contribute to the strength of the oppressive powers of the currently recognized intersectional forces.

Limitations of research

This thesis research was not able to answer exactly why *Jezebel's* editors chose to cover reproductive health issues in 2012 with extreme frequency, with an even more notable focus on the specific topic of abortion. That close to 100% of the site's health articles covered reproductive health is a topic worthy of further exploration, perhaps in a study focusing on the gatekeeping role of editors of health articles at women's magazines and the editorial and economic reasons editors have for covering (or not covering) this perennially controversial topic.

And, while the research in this thesis determined the percentage of articles that included calls to action (such as statements intended to encourage or inspire readers to become more politically active, donate to specific charities, or support specific causes), it was not able to pinpoint what percentage of readers proceeded to take specific action immediately or eventually following the reading of one or more of these articles, other than documenting the number of readers who shared the *Jezebel* articles using social media sites including Facebook and commented on the articles. The qualitative content of *Jezebel* readers' messages that accompany article sharing would be a valuable topic for future research.

It is also unknown what other effects these two websites and their volume of coverage of health topics—or lack thereof—may have had on readership numbers, or readership loyalty. Nor did this research cover the influence the health coverage may have had on other websites and publications. Whether *Jezebel*'s coverage of abortion encouraged or discouraged other mainstream women's websites or print magazines from covering the subject is also worthy of further consideration.

Yet another limitation of this research was that the number of Facebook social shares that were listed on each article's page on *Jezebel* was rounded up (or down) to the nearest hundredth place by the *Jezebel* website, perhaps in an effort to help improve the website's rendering speed (the speed with which content appears after a link is clicked on). For example, instead of listing Facebook shares as 2,458 or 1,189, it listed them as 2.5K or 1.2K. Despite this rounding, the numbers listed are still sufficient for recognizing trends and allowing inferences from the data collected. An email communication to the *Jezebel* staff seeking information on whether numbers were rounded up, or whether they

were also rounded down, was not returned.

Additional suggestions for future research

The research in this content analysis raises several topics potentially worthy of future research, both practically and theoretically. Practically, it should be of interest of politicians and political parties that *Jezebel*, an increasingly popular and influential website with millions of citizens in its audience of voting age—and a proclivity for sharing articles online to their friends and social-media followers—takes such a pointed interest in covering women’s reproductive health, and abortion in particular. It would be worth researching how *Jezebel*’s coverage of women’s health care in 2012 compares to that during 2013, a year in which the Affordable Care Act faced legal challenges and implementation issues. It would also be worthwhile to quantitatively and qualitatively survey *Jezebel* readers to determine whether they feel they were influenced by the website if and when they voted in the 2012 election, and, as a corollary, whether they may be more likely to vote for candidates who support women’s health care coverage in the 2016 election. This will be an especially intriguing point if female candidates such as Hillary Rodham Clinton and Elizabeth Warren run for the presidency.

Also of practical worth would be additional research into the influence of women’s publications on health care policy. Are *Jezebel* readers, or readers of other popular publications that editorially support female health care rights, more politically active than readers of other publications? How influential to other citizens might be shared Tweets and Facebook posts from *Jezebel* or *Glamour*? Measuring the lifecycle of the social media posts from these websites, especially *Jezebel*, and showing their national (and even international) influence, would be intriguing. Qualitatively and quantitatively analyzing

the reader comments on these posts and attempting to determine how much of an effect they have on public awareness, voting patterns, and even health care policies potentially would be a very interesting research project.

In addition, it would be helpful to learn how popular websites like *Jezebel* and *Glamour* may have influenced women and the public in other, less obvious ways, in addition to raising awareness of weight loss issues and reproductive health. Have these online articles affected women's thoughts about their own bodies, or their confidence in the U.S. legal process? Have they deterred or strengthened the resolve of those who defend reproductive rights?

Theoretical explorations

Theoretically, the oppression of women in the U.S. due to inadequate reproductive health care coverage as a contributing factor to oppressive intersectional forces bears further consideration. Indeed, a lack of or inadequate health care coverage is an element that unfortunately strengthens the oppressive force of each of the intersectional categories of socioeconomic status, race, gender, and dis/ability. It influences socioeconomic status by being a leading cause of personal bankruptcy in the United States (Dranove & Millenson, 2006). It strengthens the oppressive factor of race, as members of racial minorities are less likely to be insured (Population Reference Bureau, 2011). This paper, and the articles studied from *Jezebel.com* (and, to a lesser extent, *Glamour.com*), illustrated how gender is a major factor in health care coverage in the U.S.; one of the inspirations for the Affordable Care Act was to prevent women from not being covered for birth control, mammograms, prenatal care, childbirth, and other female-specific health issues (U.S. Department of Health and Human Services, 2013).

CONCLUSION

Personal health, health insurance, health care costs, and access to medical care have been a major concern in Americans' lives for years (Kaiser, 2012; Census.gov, 2011). In the U.S., popular women's magazines are relied upon to report on health issues and recent health advances that affect their readers (Nicholson, Gardner, Grayson & Powe, 2005). In 2012, health care changes in the U.S. included hundreds of legislative proposals that threatened to impact, or directly and negatively impacted—women's health, including reproductive health access. Also in 2012, women in the media such as Sandra Fluke repeatedly faced public criticism from conservative politicians and media figures who mocked their requests for insurance coverage for birth control, and also made widely offensive statements about rape, and inaccurate comments about the likelihood of pregnancy following rape.

The importance of *Jezebel.com*'s and *Glamour.com*'s coverage of reproductive health should not be understated, as women's publications are a major source of health information for women. In 2012, reproductive rights figured frequently in the news, surrounded by debates between political candidates at all levels across the country. Most significantly, former Massachusetts Governor and presidential candidate Mitt Romney promised to make cutbacks to women's access to contraception (Gay Stolberg, 2012). His arguably more conservative vice presidential running mate, Paul Ryan, vowed to repeal *Roe v. Wade* if elected. Given the closeness of the presidential race in the weeks leading up to the election, this was a real possibility (Cohen, 2012; Women for Obama, 2012).

Glamour and *Jezebel* both played important roles in raising awareness of the

relationship between the election and women's health issues. *Glamour* is one of the country's most-read publications (Magazine Publishers of America, 2012a) and one recognized frequently with National Magazine Awards (American Society of Magazine Editors, 2012a). *Jezebel.com* enjoyed burgeoning popularity throughout the year, especially in social media circles; its most-shared articles pertained to the Todd Akin scandal and threatened abortion access.

Jezebel's success in encouraging its readers to share its articles via social media may have contributed to the website's steadily increasing audience during 2012. This increase in audience enthusiasm for *Jezebel's* writing is essential, as, like with all websites, it helps perpetuate or even increase advertising revenue. This popularity allowed *Jezebel* to continue its editorial mission of unabashedly feminism-influenced journalism, without accepting advertising from sources not aligned with its editorial goals and audience interests. As of December 1, 2013, *Jezebel's* monthly U.S. readership, according to its parent site Gawker.com, was more than 5.3 million readers a month, an increase of nearly 2 million since early 2012, when the research for this thesis began (advertising.gawker.com).

The popularity of *Jezebel's* articles also may have influenced reader activism, such as by encouraging readers to contact their legislators and vote in the November election. With millions of U.S. women visiting these websites in the time period under analysis, and with health care and women's health playing a pivotal role in the November election, it is feasible that these websites helped influence voting patterns, prompted discussion of health issues, and even contributed to determining the election results.

This content analysis showed that despite their impressive numbers of readers and site traffic, and even their high number of health articles, both *Jezebel* and *Glamour* showed editorial coverage trends that can best be described as extremely uneven. At worst, they may be described as detrimental or even dangerous to readers who rely on women's publications as their main source of health information, as they largely omitted reporting on health topics, such as cardiac disease—the health issue that causes more deaths in women than any other (Centers for Disease Control and Prevention, 2013).

Health reporting is one area of journalism plagued by fear-mongering and factual omissions (HealthNewsReview.org, 2013). The lack of balance of health coverage seen in both of these highly popular websites that was revealed by this study was eye-opening, with *Jezebel* focusing predominantly on abortion and running health articles that almost exclusively covered reproductive health. In contrast, *Glamour* primarily focused on weight and dieting. The “ideal” mixture of articles in an online publication such as these may be considered a Venn diagram of sorts, where the publication's editorial mission and the readers' interests intersect. But featuring a majority of health articles—whether one-fourth, or nine-tenths—on one topic or category will undoubtedly have some effect on the readers, and bears further research.

These effects could range from spurring disgust at the injustice of reproductive health care in the U.S., to contemplation of the state of women's reproductive health rights, to dismay over the prevalence of abortion. Similarly, *Glamour*'s focus on health and fitness will have had an effect on its readers, whether it was to inspire them to exercise or to lament their personal state of physical fitness or appearance.

In the meantime, as *Glamour* demonstrated its narrow editorial focus on weight issues, other health issues—and especially those related to arenas of oppression highlighted by intersectionality—went by the wayside. Health issues as they related to race, economic status, dis/ability, and sexual orientation were unfortunately given short shrift by *Glamour* in 2012, despite this publication’s ostensible feminist slant and dedication to promoting women’s equality. *Glamour* may be argued as contributing to women’s oppression for running scores of articles focusing on weight loss, and its tendency to equate slim figures with women’s worth and attractiveness to current or potential romantic partners.

One could state that the oppressive nature of health care in the U.S., especially for females, is an intersectional force that the majority of women have in common. By focusing more on abortion rights than on contraceptive access and affordability, *Jezebel* could be considered to have done a disservice to American women. Abortion rights is an issue that is important to many women (Jones, Darroch & Henshaw, 2002), and contraceptive access affects the majority of heterosexual women in the U.S. at some point in their lives (Guttmacher Institute, 2012a). Breast cancer, cardiac health, and exercise and nutrition (not for weight loss or improving one’s appearance, but for overall well-being) however, are also topics deserving of coverage for the benefit of public health. While these may not be the most popular topics of their readerships, *Jezebel.com* and *Glamour.com* both could have reported more comprehensively on new research findings. Using this breaking-news angle could have helped to encourage readers to click on and read articles on a more comprehensive array of health subjects, while maintaining the websites’ high readership levels.

The overwhelming focus by *Jezebel's* on reproductive health and abortion is worthy of further monitoring and study to determine if the coverage is constant from year to year, or election cycle to election cycle; to see what effects this coverage is having on the publication's readership; to measure what effects this focus may be having on other publications; and to uncover any effects on voter behavior. As *Jezebel* itself reported, the oppressive comments by politicians including Richard Mourdock and Todd Akin influenced readers to vote for candidates who support women's health rights, though the survey cited in that article had a small sample size (*Jezebel.com*, 2012e).

Glamour's coverage of health topics may also warrant further research to determine what effects it may be having on its readership, as well as on other popular women's publications. Is its focus on diet causing it to lose readers, or to encourage its competition to cover diet and weight loss more frequently? Both *Jezebel.com* and *Glamour.com's* social sharing patterns are also worthy of further study to determine how article topics and article characteristics may affect readers' tendency to socially share article links, and to examine how this sharing may have significant and wide-reaching political ramifications with impacts on health policy and, therefore, the health and well-being of U.S. citizens.

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APPENDICES

Appendix A: Quantification Codebook

This online magazine article protocol is aimed at assessing the balance in the coverage of the 2012 War on Women. It examines the coverage given to general health topics and reproductive health topics, and the coverage given to partisan sources. The following definitions are important to the selection and analysis of the content being studied.

Keyword terms/coding definitions

The following definitions and explanations will serve as a coding sheet for this study to aid intercoder reliability:

Part IA. General definitions

- 1. Article:** A unit of news reporting. For the sake of this research, articles of 20 words or more (including a, an, and the) will be considered for analysis.
- 2. Call to action:** A call to action is a statement that encourages a reader to act. This research will be quantifying the numbers of calls to action in *Jezebel.com* and *Glamour.com* that seek to gain or preserve reproductive health access for women. Examples of calls to action include “Call your Congressperson today”; “Write your insurance company”; or “Ask your HR department about its stance on birth control coverage for employees.” A call to action can be individual focused, as the previous examples, or collective (“Remind your friends their vote counts in November.”) The presence of a phone number, website, email address, or other contact information in relation indicates a very strong, specific call to action. When a call to action was vague or

directed at sources mentioned in the articles themselves, it was termed a “nonspecific” call to action.

Part IB. Topics whose presence in an article indicates an article falls under the reproductive health category:

1. abortion; *Roe v. Wade* Abortion is the medical or surgical termination of pregnancy, currently legal prior to 12 weeks’ gestation in the United States. *Roe v. Wade* is the 1973 Supreme Court decision that legalized abortion in the United States. Presidential candidate Mitt Romney was not consistent on whether he would repeal *Roe v. Wade* if elected, but vice presidential candidate Paul Ryan expressed his opposition to *Roe v. Wade* in the press (Gay Stolberg, 2012).

2. Akin, Todd: Todd Akin is a former member of the Missouri and U.S. House of Representatives. In 2012, he won the Republican primary for the Missouri Senatorial race. He appeared frequently in the media throughout the summer of 2012 after being quoted as saying that women’s bodies have a way of “shut down” pregnancy to prevent it from occurring after rape. He stated that a “legitimate rape” would not result in pregnancy. While he later stated he misspoke, his comments on “legitimate rape” and whether pregnancy can result from such so-called rapes sparked much media attention and outrage from the public and some members of his own political party (Jaco, 2012; Miller, 2012; Moore, 2012).

3. Contraception; birth control; birth control pills; the Pill; contraceptive sponge; condoms; IUD; NuvaRing; intra-uterine device, sterilization: These are various forms of birth control available either over the counter or by prescription.

4. Definition of life Arizona lawmakers passed a bill in February that would define life as starting two weeks prior to conception, in order to help restrict the timeframe in which women may legally seek an abortion (Celock, 2012).

5. Federally mandated insurance coverage of birth control: Following the passage of President Obama's health care reform law (PPACA), companies were required to provide insurance coverage of prescription and surgical forms of birth control to their employees in 2013. Conservative organizations and other conservative groups protested this policy (Richey, 2012).

6. Feminism; feminist: For the sake of this research, "feminism" refers to the belief that women should have equal rights as men, and that they should be given access to reproductive health care.

7. Sandra Fluke Fluke, a Georgetown Law student, testified before Congress in February 2012 stating that increased insurance coverage of prescription contraceptives would make them affordable to her and her fellow students who would otherwise have difficulty obtaining them. Fluke spoke at the Democratic National Convention in September, 2012 ("Meet Sandra Fluke, the woman Rush Limbaugh called 'slut,'" 2012).

8. Komen, Susan G. Komen for the Cure; Komen for the Cure; Komen In February, 2012 and several months following, Planned Parenthood appeared frequently in the news, as the organizations' leaders were told by the breast cancer research charity Susan G. Komen for the Cure that because Planned Parenthood provides abortions, Komen would no longer provide donations, The withheld donations had been earmarked for breast cancer screenings (Wallis, 2012).

9. “Legitimate rape”; pregnancy from rape as “God’s will” (See also Akin, Todd; Mourdock, Richard): Richard Mourdock is treasurer for the state of Indiana who ran for the Senate in 2012, who stated that pregnancies resulting for rape were “God’s will” (Krieg, 2012).

10. Rush Limbaugh is the talk-show host who repeatedly and publicly criticized Sandra Fluke in 2012 because she lobbied for affordable birth control. (Ms. Blog, 2012).

11. Pregnancy: The physical state of expecting a baby.

12. Reproductive health care: Reproductive health care refers to access to abortion; annual well-woman exams including breast cancer screenings; mammograms; breast MRIs; birth control (over-the-counter, prescription, and surgical; temporary and permanent); ovarian or uterine cancer screenings or treatments; pregnancy testing; prenatal care, and obstetric or midwifery care during and after childbirth.

13. Planned Parenthood: Planned Parenthood is a national nonprofit organization founded in 1942; it was an offshoot of the American Birth Control League, founded in 1916 by Margaret Sanger (Gerhard, 2001).

14. Ultrasound mandates prior to abortion: An element of the War Against Women, ultrasound laws require uterine ultrasounds prior to abortion procedures.

15. Virginia abortion restrictions; Ken Cuccinelli: Ken Cuccinelli is Virginia’s attorney general. He has been criticized for his partisan politics, including supporting laws mandating transvaginal ultrasound prior to abortions (Rubin, 2012).

16. Waiting times: This refers to mandatory waiting periods (usually 24 hours, but in some cases 48 or 72 hours) that must be observed between an initial request to a health

care provider for an abortion and the procedure itself. New legislation aimed at increasing waiting times was voted on in several states in 2012 (Guttmacher Institute, 2012c).

17. War on Women: As the American Civil Liberties Union writes,

“The War on Women describes the legislative and rhetorical attacks on women and women’s rights taking place across the nation. It includes a wide-range of policy efforts designed to place restrictions on women’s health care and erode protections for women and their families. Examples at the state and federal level have included restricting contraception; cutting off funding for Planned Parenthood; state-mandated, medically unnecessary ultrasounds; abortion taxes; abortion waiting periods; forcing women to tell their employers why they want birth control, and prohibiting insurance companies from including abortion coverage in their policies.” (ACLU, 2012, para. 1)

Part IC: Intersectionality

Intersectionality is a feminist theory that refers to the multiple forces of oppression that affect women. They include race, socioeconomic status, sexual orientation, dis/ability, religion and cultural prejudice, and violence against women. For the purposes of this thesis, the topic of health care access was added to the list of intersectional forces.

Appendix B

Coding Procedure

The following steps should be taken with the content analysis coding guidelines described below (v stands for variable): 1) all relevant stories in *Glamour.com* and *Jezebel.com* are read to identify the specific characteristics described below, such as presence and types of sources and the presence of terms related to general health, women's health, and the War on Women.

v1. Story number (from randomization list):

v2. Coder number:

v3. Website/publication name:

v4. Date published:

v5. Headline of article:

v6. Please read the article's headline and text. Choose the category below (1-44) that most closely matches the article's main topic. This does not at all need to be exhaustive; the primary topic is all that is necessary.

Some articles may most accurately fall under two or even three categories, however. For example, an article about Todd Akin might focus on both rape and abortion. In that case, the article would be coded 1, 34 (1=abortion; 34=rape). If the article's category is not listed, please code the article as 31 (Other), and specify what its topic is.

The categories marked with a single or double asterisk need to be coded carefully. Those with a single asterisk (*) are related to reproductive health, but do not include any information pertaining to the War on Women or related topics defined above. Those with

a double asterisk (**) are related to the War on Women. Some categories may not have any articles coded for them.

1A=Abortion*

1B-Abortion**

2=Aging

3=Addiction (drugs/alcohol)

4. Alcohol

5A=Birth control/contraception*

5B. Birth control/contraception**

6. Blood pressure

7. Body image

8A=Cancer, breast (including screening/mammograms)*

8B=Cancer, breast (including screening/mammograms)**

7A=Cancer, cervical, ovarian, & uterine cancers/other reproductive cancers*

7B=Cancer, cervical, ovarian, & uterine cancers/other reproductive cancers**

8=Cancer, skin

9. Cancer, all other cancers (lung, pancreas, etc.)

10=Cardiac health/cardiac disease (includes blood pressure, cholesterol & stroke)

11=Cholesterol

12=Colds and flu

13=Depression

14=Diabetes

15=Digestion (including gluten issues/celiac disease)

16=Doctors

17=Eating disorders

18=Energy levels

19=Fitness

20=Food and drink (non-recipe focus; may mention nutrition but is not focused on it)

21=GermS/infectious diseases

22=Happiness

23=Insomnia/sleep issues

24A=Insurance*

24B=Insurance** (including Affordable Care Act/Obamacare coverage of birth control)

25A=Komen for the Cure*

25B=Komen for the Cure**

26=Medication (other than contraceptives)

27=Mental health (other than depression: schizophrenia, bipolar disorder, etc.)

28A=Menstruation, PMS, menstrual cramps*

28B=Menstruation, PMS, menstrual cramps**

29=Nutrition/vitamins & minerals

30=Osteoporosis

31=Other (please list)

32A=Planned Parenthood*

32B=Planned Parenthood**

33. Plastic surgery

34A=Pregnancy/childbirth (including fertility and miscarriage)*

34B= Pregnancy/childbirth (including fertility and miscarriage)**

35A=Rape (as differentiated from violence against women)*

35B=Rape (as differentiated from violence against women)**

36=Recipes

37A=Reproductive health (including well-woman exams)*

37B=Reproductive health (including well-woman exams)**

38A=Sexuality*

38B=Sexuality**

39=Skin health

40=Smoking

41=Sexually transmitted diseases*

42=Stress/Stress management

43A=Violence against women (non-rape)*

43B=Violence against women (non-rape)**

44=Weight (diets, weight loss, preventing weight gain)

v7. Calls to action

Please code the articles' calls to action.

1=Call to action

2=No call to action

3=Quasi call to action

Call(s) to action:

v8. Social shares

For the *Jezebel.com* articles only, please list the social media shares listed at the very top or upper left of each article. Hits are denoted by a small flame icon. Hover over this icon with your finger or mouse to obtain the number of new visitors. Facebook shares are listed directly to the right of the "F LIKE" icon. The total number of reader comments appears at the bottom of the article.

Hits:

New visitors:

Facebook shares:

Comments:

V9. Intersectionality topics

Analyze each article's topic and quantify each if it pertains to one or more of these intersectional topics: Race; sexual orientation; socioeconomic status; religion or culture; violence against women; dis/ability, and/or reproductive health care access.

APPENDIX C: TABLES

TABLE 1
Article Frequencies by Health Topic, May through October 2012

<u>Topic</u>	<u>Jezebel</u> N=242	<u>Glamour</u> N=648
Abortion*	6	0
Abortion**	61	3
Addiction	4	3
Aging	4	7
Alcohol	3	3
Birth Control*	7	7
Birth Control**	25	4
Blood Pressure	0	3
Body Image	3	20
Breastfeeding	4	3
Cancer, Breast*	8	18
Cancer, Breast**	4	3
Cancer, Reproductive*	0	1
Cancer, Skin	1	10
Cancer, Other	1	7
Cardiac Health	0	12
Cholesterol	0	0
Colds and Flu	2	3
Depression	1	7
Diabetes	3	4
Digestion	2	14
Doctors	1	4
Eating Disorders	1	5
Energy	0	8
Fitness	5	78
Food	2	124
Happiness	0	32
Infections	2	25
Insomnia	3	20
Insurance*	0	2
Insurance**	12	12
Komen*	0	0
Komen**	3	1
Medication	1	6
Mental Health	4	17
Menstruation*	4	4
Menstruation**	1	1
Nutrition	1	38
Osteoporosis	0	0
Other	19	59
Planned Parenthood**	13	1
Pregnancy*	18	18
Pregnancy**	7	1
Plastic Surgery	1	5
Rape*	0	1

Rape**	16	0
Recipes	0	92
Reproductive Health*	7	8
Reproductive Health**	21	8
Sexuality	8	9
Skin Health	0	6
Smoking	3	10
STDs*	6	2
Stress	3	14
Violence vs. Women*	2	2
Weight	18	85

Note. A single asterisk (*) denotes reproductive health topics. A double asterisk (**) denotes reproductive health topics associated with the War on Women. Figures of statistical significance are noted in bold.

TABLE 2
Article Ratios by Health Topic, May through October 2012

Topic	<i>Jezebel</i>	<i>Glamour</i>
	<i>N=242</i>	<i>N=648</i>
	<u>Percent of Total Health Articles</u>	
Abortion*	0.41	0.00
Abortion**	25.20	0.46
Addiction	1.65	0.46
Aging	1.65	1.08
Alcohol	1.24	0.46
Birth Control*	2.89	1.08
Birth Control**	10.33	0.62
Blood Pressure	0.00	0.46
Body Image	1.24	3.09
Breastfeeding*	1.65	0.46
Cancer, Breast*	3.30	2.78
Cancer, Breast**	1.65	0.46
Cancer, Reproductive*	0.00	0.15
Cancer, Skin	0.41	1.55
Cancer, Other	0.41	1.08
Cardiac Health	0.00	1.85
Cholesterol	0.00	0.00
Colds and Flu	0.83	0.46
Depression	0.41	1.08
Diabetes	1.24	0.62
Digestion	0.83	2.16
Doctors	0.41	0.62
Eating Disorders	0.41	0.77
Energy	0.00	1.24
Fitness	2.07	12.06
Food	0.83	19.17
Happiness	0.00	4.95
Infections	0.83	3.86
Insomnia	1.24	3.09
Insurance*	0.00	0.31
Insurance**	4.96	1.85
Komen*	0.00	0.00

Komen**	1.24	0.15
Medication	0.41	0.93
Mental Health	1.65	2.63
Menstruation*	1.65	0.62
Menstruation**	0.41	0.15
Nutrition	0.41	5.71
Osteoporosis	0.00	0.00
Other	7.85	9.12
Planned Parenthood**	5.37	0.15
Pregnancy*	7.44	2.78
Pregnancy**	2.89	0.15
Plastic Surgery	0.41	0.77
Rape*	0.00	0.15
Rape**	6.61	0.00
Recipes	0.00	14.22
Reproductive Health*	2.89	1.24
Reproductive Health**	8.68	1.24
Sexuality*	3.31	1.39
Skin Health	0.00	0.92
Smoking	1.24	1.55
STDs*	2.48	0.31
Stress	1.24	2.16
Violence vs. Women*	0.83	0.31
Weight	7.44	13.14

Note. A single asterisk (*) denotes reproductive health topics. A double asterisk (**) denotes reproductive health topics associated with the War on Women. Figures over 5% are noted in bold.

TABLE 3
Sums and Ratios of Reproductive Health Articles (General)

Topic	Reproductive Health Articles, General			
	Number of Articles		Percent of Article Total	
	<i>Jezebel</i> N=242	<i>Glamour</i> N=648	<i>Jezebel</i>	<i>Glamour</i>
Abortion	6	0	0.41	0.00
Birth Control	7	7	2.89	1.08
Breastfeeding	4	3	1.65	0.46
Cancer, Breast	8	18	3.30	2.78
Cancer, Reproductive	0	1	0.00	0.15
Insurance	0	2	0.00	0.00
Komen for the Cure	0	0	0.00	0.00
Menstruation	4	4	1.65	0.62
Pregnancy	18	18	7.44	2.78
Rape	0	1	0.00	0.15
Reproductive Health	7	8	2.89	1.24
Sexuality	8	9	3.31	1.39
STDs	6	2	2.48	0.31
Violence vs. Women	2	2	0.83	0.31
Σ	70	75	26.85	11.27

TABLE 4*Sums and Ratios of War on Women–Related Reproductive Health Articles*

War on Women–Related Reproductive Health Articles

<u>Topic</u>	<u>Number of Articles</u>		<u>Percent of Article Total</u>	
	<u>Jezebel</u>	<u>Glamour</u>	<u>Jezebel</u>	<u>Glamour</u>
	<i>N</i> =242	<i>N</i> =648		
Abortion	61	3	25.20	0.46
Birth Control	25	4	10.33	0.62
Cancer, Breast	4	3	1.65	0.46
Insurance	12	12	4.96	1.85
Komen for the Cure	3	1	1.24	0.15
Menstruation	1	1	0.41	0.15
Planned Parenthood	13	1	5.37	0.15
Pregnancy	7	1	2.89	0.15
Rape	16	0	6.61	0.00
Reproductive Health	21	8	8.68	1.24
Σ	163	34	67.34	5.23

TABLE 5*Reproductive Health and War on Women–Related Reproductive Health Article Totals*

<u>Category</u>	<u>Number of articles</u>		<u>Percent of Article Total</u>	
	<u>Jezebel</u>	<u>Glamour</u>	<u>Jezebel</u>	<u>Glamour</u>
	<i>N</i> =242	<i>N</i> =648		
Reproductive health, general (RHG)	70	75	28.93	11.59
Reproductive health, WOW (RHW)	163	34	67.34	5.25
Σ RHG + RHW	233	109	96.28	16.84

Note. The sums of articles from both publications is greater than 100, as some articles were counted in more than one category. WOW refers to the War on Women. RHW refers to Reproductive Health articles pertaining to WOW.

TABLE 6: Cross-Tabulation of Calls to Action

Publication	Call to Action: Present	Call to Action: Not Present	Call to Action: Quasi CTA present
<i>Jezebel</i> (<i>n</i> =59)	14	33	12
<i>Glamour</i> (<i>n</i> =161)	11	141	9

TABLE 7:
Social Media Sharing in *Jezebel* Articles with a Call to Action
(n=14)

Hits	Facebook Shares	New Visitors	Comments
26252	865	2118	398
36152	2700	5350	188
99168	25000	39861	321
24726	240	5628	57
20284	59	546	72
6803	81	304	44
73452	994	9254	616
115110	4300	24557	636
17783	701	1344	143
35899	1800	4923	141
7214	9	160	13
19828	220	1292	164
90002	120	9604	766
83435	1100	16386	106

Table 8:
Social Media Sharing in *Jezebel* Articles Containing No Call to Action
(n=33)

Hits	Facebook Shares	New Visitors	Comments
30892	281	3154	154
47675	178	9894	183
14882	1900	1545	101
16151	854	1332	179
15630	156	861	114
23893	274	1914	152
20662	201	2226	194
48129	7600	10493	324
38048	541	3255	835
20288	431	2067	152
27954	245	2218	100
8180	56	451	49
12280	13	588	56
17473	186	2874	74
32356	1600	8242	165
22207	749	3268	106
29000	18	622	316
24340	1800	2701	87
6593	9	443	19
149823*	6000	45221	893
14737	306	1255	48

24466	73	1826	158
9778	46	280	82
5810	7	352	29
7498	51	511	96
43574	234	3657	217
10040	9	467	66
21695	381	1844	100
21929	322	1091	134
12092	438	997	60
32550	327	1998	127
3582	28	271	18
87989	444	15103	306
17140	333	1020	212

Note. Article marked with an asterisk (*) denotes an outlier article on now-former Missouri Rep. Todd Akin, which received significantly more hits than other articles. This article may have been linked to from a website receiving more daily traffic than *Jezebel*, such as *HuffingtonPost.com*.

Table 9:
Means of Social Sharing Measures in *Jezebel* Articles by Call to Action Type

Means (*M*) of Reader Engagement and Social Media Sharing in *Jezebel* Articles

	Hits	Facebook Shares	New Visitors	Comments
CTA (<i>n</i> =14)	46865	2728	8666	262
No CTA (<i>n</i> =33)	27858	791	4062	179
Quasi CTA (<i>n</i> =11)	25474	1315	3880	167

Table 10:
Quantification of Intersectional Issues by Website

	Race	Sexual orientation	Socio-economic status	Dis/ability	Religion, culture, or country of origin	Violence against women	Health access
Publication							
<i>Jezebel</i> <i>N</i> =242	5	4	4	0	27	14	93
<i>Glamour</i> <i>N</i> =648	1	0	1	4	6	0	15