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# Medical Dramas as Narrative Ecosystems

## Abortion Representation and Thematic Incorporation in *New Amsterdam*

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**Abstract:** Medical television dramas have become a prominent genre, blending personal and professional narratives within healthcare settings. These series explore the lives of healthcare professionals, ethical dilemmas, and complex doctor–patient relationships while incorporating critical social issues such as abortion as pedagogical tools that shape public perceptions of healthcare and social debates. This article examines how medical dramas like *New Amsterdam* integrate sensitive topics into their storytelling, contributing to narrative ecosystems theory. Through this framework, the analysis explores mechanisms such as character embedding, narrative alignment, and long-term memory, demonstrating how social issues are woven into narratives and influence discourse. By analyzing the *New Amsterdam* episode “Maybe Tomorrow,” the article illustrates how narrative ecosystems function in serialized television and mirror societal debates on sensitive topics. The findings offer theoretical insights into narrative ecosystem dynamics, highlighting the reciprocal relationship between media narratives and social discourse, emphasizing medical dramas’ role in reflecting and influencing ongoing sociopolitical conversations.

**Keywords:** abortion, character embedding, long-term memory, medical dramas, narrative ecosystems, social discourse

### Navigating Social Issues through Medical Television Series

Medical dramas have become a notable genre in broadcast television, captivating a broad audience with their intricate blend of personal and medical storylines (Leonzi et al. 2020; Rocchi 2019; Turow 2010). These series explore the lives of healthcare workers and their patient interactions by reconstructing, within their microcosm, the overlapping of everyday randomness with professional, social, and personal relationships typical of the broader human experience (Pescatore and Rocchi 2019). This narrative structure integrates individual medical cases within ongoing story arcs, allowing for rich character development and offering an in-depth look at medical dilemmas, ethical issues, and complex doctor–patient relationships. The appeal of these dramas stems from their skillful combination of critical medical situations with sentimental and professional plots, providing viewers with engaging stories and a deeper insight into the healthcare field.

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Moreover, these shows serve an educational role, influencing viewers' understanding of medical knowledge, ethical dilemmas, and professional practices, thus becoming informative tools (Baños et al. 2019; Comelles and Brigidi 2014; Hoffman et al. 2017). They spark conversations on essential topics, encourage accurate media portrayals, and can even impact viewers' career decisions (Haboubi et al. 2015; Terry and Peck 2019). Importantly, they shape the public's perceptions of health and healthcare systems (Gerbner et al. 2002; Hether et al. 2008).

Medical dramas are not just entertainment; they are complex narrative ecosystems that reflect societal views on medicine, relationships, and life's uncertainties (Pescatore 2023). As open and permeable forms, broadcast series absorb and rework reality. Their structure accommodates diverse characters—main, recurring, or episodic—ranging from long-term staff to one-time patients (Pescatore and Rocchi 2019). The serialized format, with its repetitive yet evolving nature, enables the continual integration of new characters, medical advances, or sociopolitical themes, sustaining viewer engagement (Pescatore 2018). By addressing moral, social, political, and economic structures, these dramas serve pedagogical functions, encouraging viewers to reflect on values and life choices (Jovanović 2023). They also delve into psychological complexity, portraying characters' growth through pivotal events (O'Meara 2015).

As contemporary issues dominate public discourse, television series are often informed by these societal concerns, shaping conversations around them (Henderson 2007; Klein 2011). Medical dramas such as *Chicago Med*, *The Resident*, *New Amsterdam*, *Grey's Anatomy*, and *The Good Doctor* exemplify this trend by incorporating themes like the COVID-19 pandemic (Sonego 2023), abortion rights, and systemic racism into their narratives. These series provide culturally rich narratives that challenge societal norms, offering nuanced representations of gender, race, LGBTQIA+ communities, and disability (Borry 2021; Cambra Badii et al. 2021; Cramer 2016; Davin 2003; Hoffman et al. 2017; Moore 2019; Pullen 2018; Rocchi and Farinacci 2020; Whybrew 2015; Zuk 2017). We chose to analyze sensitive themes such as abortion precisely because they are clearly identifiable, widely debated, and traceable within public discourse. These topics, often linked to specific keywords (for example, abortion, mental health, racism), serve as effective case studies; however, the process of incorporating themes from social discursiveness into narrative structures can be applied to any topic.

Medical series frequently engage with contemporary issues not only reflecting ongoing social conversations but also shaping them. However, choosing one perspective over another in these portrayals can sometimes alienate certain segments of the audience, leaving them feeling unrepresented or even offended. Media portrayals of abortion, for instance, convey progressive attitudes but still contain depiction errors and issues (Shain 2015; Sisson and Kimport 2017), while contributing to a dynamic dialogue, and influencing societal perspectives. While abortion narratives resonate

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with cultural and legal shifts, they often misrepresent medical risks, potentially distorting public perception (Sisson and Rowland 2017). Viewer impact studies show that media can educate about medical facts, as evidenced by reactions to *Grey's Anatomy* (Sisson et al. 2021). Nevertheless, negative portrayals may contribute to the proliferation of anti-abortion sentiments (Brooks et al. 2022). In the period following the overturning of *Roe v. Wade*, media dramatizations of abortion have the potential to negatively impact the portrayal of women seeking them (Weinstein 2022).

The portrayal of abortion in medical dramas exemplifies the processes of circulation and negotiation described by Luc Herman and Bart Vervaeck (2017, 2019). It reflects a negotiated relationship between narrative structures, social discourse, and cultural contexts. In series like *Grey's Anatomy* and *New Amsterdam*, abortion storylines navigate medical ethics, personal autonomy, and societal attitudes, echoing ongoing legal and ethical debates. A character's abortion decision—for example, due to medical complications—often embodies broader cultural dilemmas. These narratives invite viewers to reassess their views, while promotional content and fan discourse amplify their circulation and contribute to reshaping societal narratives around sensitive topics.

In our work, we hypothesize that the incorporation of sensitive themes, such as abortion, into serial narratives often occurs through embedding these themes in the characters themselves. This process allows sensitive topics to be explored in a more personal and relatable way, with characters acting as vessels for negotiating complex social issues within the narrative ecosystem. To examine this phenomenon more closely, we will focus on the *New Amsterdam* episode “Maybe Tomorrow” (season 5, episode 7). This episode stands out for its intense focus on the theme of abortion, which occupies approximately 80 percent of its total runtime—specifically, 33 minutes and 12 seconds out of 41 minutes and 24 seconds. This substantial allocation underscores the episode's dedication to exploring various dimensions of abortion, making it a central narrative element rather than a peripheral subplot. Focusing on a specific topic is characteristic of *New Amsterdam*, as seen in other episodes where critical issues are thoroughly examined within its narrative framework, such as “Why Not Yesterday” (season 3, episode 6), addressing systemic racism, or “Heal Thyself” (season 5, episode 4), focusing on mental health. Compared to other medical dramas, the emphasis on the abortion storyline in “Maybe Tomorrow” is notably high. For example, *The Good Doctor* episode “Lim” (season 4, episode 6), which deals with ethical dilemmas related to abortion, dedicates only 4 minutes and 22 seconds to the topic. Similarly, *Grey's Anatomy's* episode “Save Me” (season 1, episode 8), where abortion issues are addressed, allocates just 3 minutes and 31 seconds. These comparisons highlight *New Amsterdam's* unique approach in providing an in-depth examination of complex social issues within its storytelling. In “Maybe Tomorrow,” the staff of New Amsterdam Hospital grapples with the immedi-

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ate aftermath of the US Supreme Court's decision to overturn *Roe v. Wade*. The episode opens with a montage of characters reacting to the news, setting the tone for a narrative deeply intertwined with the personal and professional impacts of the ruling.

Throughout the episode, the characters' personal stories are inextricably linked with their professional roles, each confronting the ramifications of the Supreme Court's decision in their own way. "Maybe Tomorrow" explores themes of personal autonomy, ethical dilemmas, and social justice. The narrative not only drives the plot but also allows for deep character development, setting the stage for an in-depth analysis of how the narrative ecosystem operates within the episode. Before delving into the case study's exemplification of this concept and its execution of social functions, it is essential first to outline the theoretical model of narrative ecosystems. This foundation will clarify the framework used to interpret the episode's contributions to public discourse and character dynamics.

### **Theoretical Framework**

Narrative ecosystems are open, interconnected structures where biotic and abiotic elements interact dynamically (Brembilla and De Pascalis 2018; Pescatore and Innocenti 2016; Pescatore and Rocchi 2019). More specifically, medical dramas are complex narrative ecosystems that engage, educate, and influence. Their world-building prowess and narrative ecosystem construction are emblematic of their capacity to transcend mere entertainment, serving as a medium through which viewers can navigate and make sense of the world and its myriad challenges (Boni 2017; Pescatore 2018).

To simplify the functioning of these ecosystems, we can utilize a biological model inspired by Elinor Ostrom's work (2009) and the subsequent developments by Lael Parrot and colleagues (2012), which simulates a social-ecological system using a bottom-up approach.

The diagram in figure 1 illustrates the dynamic interactions within a media narrative ecosystem, highlighting the roles of governance, social discourse, and narrative components. Below, we describe each element of the model and exemplify it through the case of abortion in medical dramas.

#### ***Policy and Management Scenario (Governance System)***

This element refers to explicit policies such as public policies, legal systems, regulatory authorities, and self-regulation codes (Baldwin et al. 2012; Jaramillo 2018; Napoli 2001). These elements define the limits within which the series develops, shaping both production and social discourse. Policy changes influence the social agenda, guiding public conversation on relevant issues. The governance system also receives input and feedback from social discourse and narrative processes, ensuring a dynamic interaction between governance and narrative evolution. In the context of abortion, the policy and management scenario plays a crucial role in shaping its representation in medical dramas, primarily through its influence on

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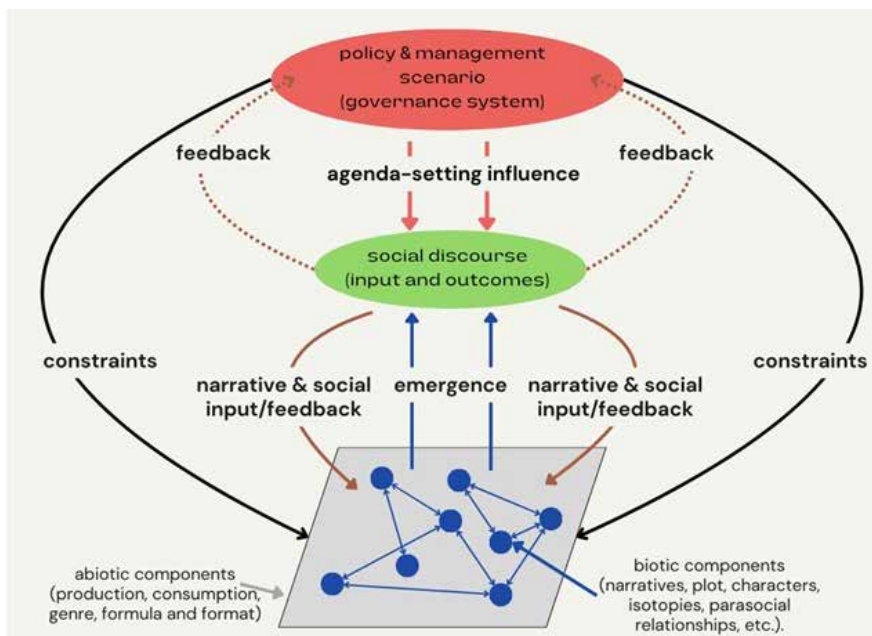


Figure 1. Narrative Ecosystem Framework Model

social discourse. For instance, the legal and regulatory aspects are often explored through characters' experiences, particularly following the US Supreme Court's reversal of *Roe v. Wade* on 24 June 2022. This decision, which had previously established abortion as a federal right in the United States, introduced significant regional variations in abortion access. While these legal changes also have effects on representation, as we will see later, they influence the narrative indirectly by shaping the social discourse around abortion. As policies shift, they set the social agenda, which then filters into the series' portrayals of characters and their dilemmas.

### **Social Discourse (Input and Outcomes)**

This component represents both the agenda of socially relevant issues and cultural and ideological conditions, as well as the public conversation triggered by the series on various topics (Caldwell 2004; Couldry 2003; Jenkins 2006). Shaped by the agenda-setting influence of policy and management scenarios, social discourse interacts with the narrative components, influencing their development. It feeds back into the governance system, which can, in turn, adjust its dynamics based on societal feedback.

Social discourse on abortion is a key element of the narrative ecosystem. Policy shifts, such as the overturning of *Roe v. Wade*, elevate the topic in public debate. Medical dramas incorporate these discussions, addressing stigma and judgment to raise awareness and promote understanding of the challenges faced by women seeking abortion. These storylines spark audience engagement—comments, debates, and feedback—that can influence future narratives, demonstrating the system's responsiveness. Social discourse also interacts with regulation: audience reactions may fuel

public debate and, in turn, affect political attitudes and policy. Notably, “Maybe Tomorrow” aired on 1 November 2022, just before the US mid-term elections, where abortion was a major campaign issue—suggesting a strategic intent to engage viewers.

### ***Biotic Components (Blue Network)***

In the context of narrative ecosystems—drawing from models of natural ecosystems—the biotic components represent the living narrative elements that are dynamic and evolve over time, much like living organisms in a biological ecosystem. These include narrative elements such as plot (Pérez López and Ortiz 2021), characters (Pescatore 2018), isotopies (Rocchi and Pescatore 2022), parasocial relationships (Lacalle et al. 2021), and their interactions. They are shaped by established abiotic components, or the narrative codes and conventions, which also evolve over time. These conventions must also incorporate the constraints imposed by the governance system and the agenda and influences of social discourse. The relationships between biotic components are key to emergence, meaning the creation of new structures and patterns within the narrative system.

In medical dramas, biotic components animate the issue of abortion through compelling storytelling. In *Grey’s Anatomy*, Dr. Cristina Yang’s decision to terminate a pregnancy reveals both her convictions and the resulting conflict with Dr. Owen Hunt. Similarly, in *New Amsterdam’s* “Maybe Tomorrow,” Dr. Lauren Bloom’s abortion history explores emotional and ethical aspects of reproductive care. These storylines are often framed in clinical settings, highlighting counseling and informed consent. They also address the psychological effects on both patients and providers, revealing personal and professional dilemmas. By incorporating both pro-choice and pro-life perspectives, these narratives reflect the ethical complexity of abortion. Influenced by narrative conventions, governance constraints, and social discourse, they evolve in response to contemporary societal issues.

### ***Abiotic Components (Gray Box)***

Analogous to non-living elements in a natural ecosystem, the abiotic components in a narrative ecosystem represent the media context—the organized resources and structural factors that the narrative draws from. These include formal narrative structures like genre and formula, as well as economic-productive aspects and audience considerations. These elements define the framework within which the series is created, distributed, and consumed, influencing both content and development. The economic-productive aspects—such as budgets, contracts, labor relations, and production schedules—impact what stories are told and how they are presented. For instance, budget constraints might limit the depth to which complex issues like abortion are explored. Audience considerations—including audience data, ratings, scheduling, and engagement strategies—

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guide producers in tailoring content that resonates with viewers and aligns with network objectives.

### ***Feedback and Constraints***

In this model, the concept of feedback and constraints expresses the dynamic and recursive nature of the narrative ecosystem: each element (policy, social discourse, biotic, and abiotic components) is subject to constraints that limit its action but simultaneously receives feedback from other elements, influencing its evolution. The emergence of narrative dynamics happens through this complex interaction between components and constraints, producing new content and narrative patterns.

The overturning of *Roe v. Wade* exemplifies how real-world events are incorporated into medical dramas. This decision intensified debates on abortion rights, turning policy shifts into central elements of character development and plot. Feedback loops between social discourse, governance, and narrative components keep topics like abortion dynamic within serialized storytelling. The series reflect real-world complexities, while audience reactions feed into social discourse—potentially influencing both governance and future narratives, and exemplifying the emergent properties of the narrative ecosystem.

### **Narrative Aspects in Medical Dramas: Character Embedding, Alignment, and Long-Term Memory**

In the narrative ecosystem of medical dramas, characters serve as fundamental drivers of both plot and theme development, acting as dynamic vehicles through which complex issues are explored. Focusing on the example of abortion, we can identify three key characteristics of narrative ecosystems: character embedding, alignment, and long-term memory. The *New Amsterdam* episode “Maybe Tomorrow” provides a compelling illustration of these concepts.

#### ***Character Embedding***

Character embedding in narrative ecosystems refers to the integration of themes from social discourse into characters, tailoring these themes to each character’s unique traits and circumstances. This process allows socially relevant issues to become deeply integrated into the characters’ identities, motivations, and development, facilitating a multidimensional exploration of complex topics. In “Maybe Tomorrow,” the theme of abortion is woven into the characters’ lives, illustrating how the overturning of *Roe v. Wade* shapes their personal experiences and drives their development within the serial narrative. The high frequency of character appearances—particularly Dr. Max Goodwin’s central role in the hospital discussions—underscores the integral involvement of the main cast. For instance, Dr. Lauren Bloom’s revelation of having undergone two abortions—one following a traumatic sexual assault and another during her

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complicated relationship with Dr. Floyd Reynolds—serves as a particularly salient example. Rather than merely stating these events as backstory, the show dramatizes Bloom’s experiences through candid conversations that allow viewers to see how the emotional and psychological repercussions of each abortion shape her present-day decision-making. The initial abortion, which occurred in solitude and was followed by a period of isolation, has profoundly influenced her stance on patient advocacy, as she emphasizes patient autonomy and the provision of a supportive environment. This perspective is informed by her own experiences navigating limited resources and social stigma. The second abortion, which transpired during her relationship with Dr. Reynolds, continues to resonate between them, as their interactions in the episode are characterized by unspoken tension, guilt, and a shared sense of unresolved emotional matters.

Concurrently, Dr. Max Goodwin’s ethical dilemma over hospital policy in post-Roe America intersects with Dr. Bloom’s narrative, contrasting institutional challenges with personal consequences. Bloom’s story emphasizes the human impact of restricted reproductive rights, while Goodwin’s established role as an advocate for equitable care—through efforts on opioid addiction, insurance gaps, and hospital access—frames his commitment to reproductive services. His struggle to ensure care under legal constraints exemplifies how systemic shifts affect both professionals and patients. This intertwining of Bloom’s emotional journey and Goodwin’s administrative role embeds the abortion theme within character motivations and broader healthcare discourse.

Other characters—Dr. Reynolds, Dr. Wilder, Dr. Frome, and Karen Brantley—enrich the episode’s thematic depth. Wilder faces the ethical tension between medical advice and patient autonomy, ultimately respecting her patient’s choice. Frome’s defense of a patient during a protest leads to personal and legal fallout, exposing his fears about future erosions of civil rights. These subplots expand the narrative’s engagement with the sociopolitical implications of the ruling.

By integrating multiple viewpoints into the episode’s core conflicts, “Maybe Tomorrow” avoids a simplistic treatment of abortion, instead highlighting how legal rulings and personal histories converge into complex moral, emotional, and professional dilemmas. This illustrates the effectiveness of character embedding, which weaves social issues into the narrative through characters’ lived experiences. Each reaction reflects not only personal beliefs, but also past traumas, interpersonal ties, and ethical tensions in their professional roles.

### ***Alignment***

Alignment in narrative ecosystems refers to the tendency of narratives to present themes from social discourse in a way that aligns with a particular viewpoint considered appropriate or ethically correct, even while acknowledging multiple perspectives. In “Maybe Tomorrow,” *New Amsterdam*

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aligns its narrative toward a pro-choice stance, advocating for personal autonomy and access to comprehensive healthcare. Drawing on Murray Smith's (1994) structure of sympathy, which distinguishes between recognition, alignment, and allegiance, many viewers have already built a strong sense of allegiance to Goodwin, Bloom, and other professionals over the course of multiple seasons. They recognize these characters not merely as fictional figures but as likable, morally driven individuals, whose backstories and professional commitments have gradually been revealed. When these sympathetic characters advocate for reproductive rights, the audience's existing emotional attachment predisposes them to care about the social issue in question, effectively reinforcing the episode's pro-choice alignment.

Dr. Bloom's candid sharing of her abortion experiences underscores the importance of having the freedom to make personal medical decisions. Her narrative validates her choices and emphasizes autonomy, reinforcing the pro-choice alignment. By openly discussing her abortions, she educates and empowers both the medical students and the audience, fostering a culture of openness and understanding. Dr. Goodwin's persistent efforts to provide abortion services, despite legal obstacles, highlight the necessity of access to care and the ethical imperative to challenge restrictive policies. His willingness to explore unconventional solutions reflects the narrative's support for systemic change and the protection of reproductive freedoms. His actions emphasize that access to reproductive healthcare is a fundamental right worth defending, aligning the narrative with pro-choice values. At the same time, the narrative respects diverse beliefs and honors individual choices, illustrating the nuanced nature of the issue. Dr. Wilder's handling of her patient's decision to refuse an abortion, despite medical advice, demonstrates a commitment to patient autonomy—even when that choice diverges from medical recommendations. This portrayal reinforces the principle that the right to choose encompasses all personal medical decisions, aligning with the broader pro-choice perspective that supports individual agency. Dr. Frome's actions during the protest further contribute to the episode's alignment. His defense of a patient facing harassment underscores the importance of protecting individuals' access to healthcare services without intimidation or obstruction. Although his intervention leads to personal and legal consequences, the narrative frames his actions sympathetically, highlighting the moral urgency of standing up against injustice. His experiences reflect the broader implications of eroding rights, connecting the issue of abortion to potential threats to other personal freedoms.

Through these narratives, "Maybe Tomorrow" guides audience perceptions toward supporting reproductive rights while presenting a balanced exploration of the issue. The episode acknowledges the moral and ethical complexities surrounding abortion by depicting characters who grapple with difficult decisions and respect diverse beliefs. However, the overarch-

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ing alignment is clear: the narrative endorses the pro-choice perspective as ethically appropriate and necessary in the face of restrictive policies.

This alignment shapes social discourse by reinforcing specific viewpoints. By portraying the pro-choice stance as empathetic, rational, and morally sound, the episode invites reflection on reproductive healthcare access and the risks of restricting personal freedoms. While abortion has appeared in earlier *New Amsterdam* episodes—usually in brief, patient-centered subplots—these remained secondary to other hospital crises. In contrast, “Maybe Tomorrow” centralizes the theme, involving main characters and allowing a deeper exploration of its personal, professional, and ethical dimensions. Through this focus, the series actively contributes to public debate, supporting values tied to reproductive rights and social justice.

### ***Long-Term Memory***

In narrative ecosystems, long-term memory refers to a story’s capacity to store and later retrieve information not immediately present. In long-running serialized narratives, this mechanism is essential, as events, characters, or themes may be “virtualized”—temporarily set aside by the narrative and forgotten by audiences—until reactivated. It enriches the story by reconnecting with past arcs and deepening character development. Long-term memory operates in two main ways: by reintroducing past elements into the current narrative and by supplying background information when needed to support comprehension.

First, long-term memory reconnects the current narrative with past stories and characters that had been set aside or virtualized. In “Maybe Tomorrow,” Dr. Bloom’s revelation about her abortions serves as a prime example. By disclosing her past experiences—including one abortion after being drugged at a party and another during her relationship with Dr. Reynolds—the narrative reactivates previous storylines and character dynamics that had been dormant. This reintroduction adds new dimensions to their relationship, influencing current interactions and allowing for a more profound exploration of their characters.

Second, long-term memory functions on demand, supplying past information necessary to understand present events (Mittell 2009). It helps the audience grasp characters’ motivations and emotions, even when their backstories have not been recently recalled. For instance, Dr. Frome’s fears about threats to LGBTQ+ rights stem from personal experiences of discrimination and the struggles he and his husband Martin have faced. This background, reintroduced when he apologizes to avoid legal repercussions, deepens the audience’s understanding of his actions and the stakes involved.

The dual function of long-term memory reactivates past storylines and provides background information, enriching narrative depth and aiding audience engagement. It mirrors real-life dynamics, where past events shape present behavior. In serialized shows like *New Amsterdam*, this mechanism

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supports complex character development and seamless integration of past and present, ensuring that themes like abortion are not isolated but embedded in ongoing narrative reflections.

The *New Amsterdam* episode “Maybe Tomorrow” exemplifies how medical dramas utilize character embedding, alignment, and long-term memory to integrate complex social issues like abortion into their storytelling. By presenting the characters within these three elements, the narrative demonstrates the adaptive and influential nature of serialized storytelling in reflecting and shaping social discourse.

### **Linking Narrative Components to Social Discourse within the Ecosystem Framework**

To gain a deeper understanding of the theoretical framework and the analysis of “Maybe Tomorrow,” it is essential to examine the interaction between the narrative level, which encompasses both the biotic and abiotic components, and the other levels within the narrative ecosystem model. This interaction provides insight into how medical dramas like *New Amsterdam* engage with and influence social discourse, particularly in the portrayal of sensitive issues such as abortion.

This article does not examine the interrelationships between the Policy & Management Scenario (Governance System) and Social Discourse, a domain typically explored within sociology. Instead, it focuses on how modifications in civil and criminal laws and codes at federal, state, and local levels influence narrative representation. Specifically, the US Supreme Court’s decision to overturn *Roe v. Wade* serves as a pivotal external influence that permeates the narrative ecosystem of *New Amsterdam*. This landmark ruling effectively removed federal protection for abortion rights, allowing individual states to enact their own legislation governing abortion access. As a result, the legal landscape became a patchwork of varying laws, with some states imposing strict restrictions or outright bans. This legal shift does not alter television-specific regulations or content policies directly; rather, it affects the narrative indirectly by redefining what is representable within the show’s referential framework. In medical dramas that strive for realism, such as *New Amsterdam*, representation is constrained by current laws and the practical functioning of healthcare systems, which are governed by federal statutes and state-specific civil and criminal codes. For instance, depicting an abortion performed legally in a Texas healthcare facility post-Roe reversal would contradict the new legal realities in that state, where abortion may now be illegal or heavily restricted. Such a portrayal would no longer align with the authentic operating conditions of healthcare providers in that jurisdiction. These constraints stem from the governance system’s influence on narrative possibilities, specifically through the complex interplay of federal, state, and local laws that delineate the boundaries within which the story can authentically operate. The characters and plotlines must navigate this legal environment to maintain

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credibility and realism. Consequently, the series must adapt its narratives to reflect the current legal context, ensuring that the representation of medical practices, such as abortion services, aligns with the applicable civil and criminal regulations across different jurisdictions.

However, incorporating themes from social discourse—such as the abortion debate intensified by the *Roe v. Wade* ruling—is primarily driven by narrative and social input from the Social Discourse component. This incorporation is a selective process, akin to “cherry-picking,” where the production chooses themes prevalent in social discussions to integrate into the narrative. The ability to rapidly respond to such societal changes is facilitated by the Abiotic Components of the narrative ecosystem, particularly the production formula of broadcast seriality. Broadcast seriality involves producing episodes sequentially, often with a short lead time before airing. This production model allows for greater permeability to current events and topical issues, as there is a relatively short turnaround between real-world developments and their representation on screen. In the case of “Maybe Tomorrow,” the Supreme Court’s decision on 24 June 2022 was incorporated into an episode that aired on 1 November 2022. Considering production schedules, this reflects a swift integration of a significant societal change into the narrative, demonstrating the responsiveness of broadcast serials to social discourse.

Within the narrative ecosystem, the incorporation of the theme of abortion leads to the emergence of new narrative patterns, achieved through mechanisms like character embedding, alignment, and long-term memory. These emergent patterns not only enrich the narrative but also feed back into social discourse, potentially reshaping public conversations and perceptions. This cyclical process exemplifies the dynamic interaction between the narrative and social levels, where each influences and informs the other. While various media effect theories attempt to explain how media objects produce social effects—ranging from long-term influences posited by Cultivation Theory to immediate impacts observed in studies of virality—these models often adopt a unidirectional perspective, flowing from media to society. This unidirectional bias has been critically examined by the tradition of audience studies, which highlight the active role of audiences in interpreting, negotiating, and sometimes resisting media messages (Schröder 2019). In contrast, the narrative ecosystem model emphasizes a negotiated and circular dynamic between media narratives and social discursiveness. It acknowledges that while media can shape social discourse, it is also shaped by it, allowing for feedback loops that continually adapt and evolve both the narrative and societal conversations (Pescatore 2023).

To trace the effects of the emergent narrative patterns from “Maybe Tomorrow,” this article focuses on discussions within social media platforms, particularly Reddit. By examining audience reactions and conversations in these forums, we can observe how the episode influences social

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discourse in the short term. This approach aligns with the narrative ecosystem model's preference for analyzing social discursiveness—comprising texts produced across various channels with differing levels of public visibility—over more abstract concepts like culture or public sphere. It also acknowledges the limitations inherent in assessing long-term media effects within the scope of this article.

Reddit, known for its diverse and active user base, has become central to social TV engagement (Bentley 2017), making it an ideal platform to explore how audiences perceive and discuss sensitive issues depicted in television shows like *New Amsterdam*. We identified relevant subreddits, including r/television, r/NewAmsterdamTV, and r/Abortion, along with two additional specific subreddits related to the series, allowing us to focus on threads discussing the *New Amsterdam* episode “Maybe Tomorrow” and its portrayal of abortion. Using keywords such as “New Amsterdam abortion,” “New Amsterdam maybe tomorrow,” and “New Amsterdam S05E07,” we located threads with significant engagement. Between 1 November 2022 and 2024, we analyzed a total of 865 comments spread across five subreddits, including one general subreddit about abortion on TV. This analysis allowed us to gauge viewers' reactions to the portrayal of abortion in the episode.

Our analysis revealed that “Maybe Tomorrow” sparked a wide range of reactions among viewers, reflecting the contentious nature of abortion storylines in media and the heightened debate following the overturning of *Roe v. Wade*. Many fans appreciated the show's effort to address the complex and sensitive topic, especially in light of recent legal changes. One viewer noted the timely placement of the episode, commenting, “It's not a coincidence. The nationwide ban is coming next. Next week, probably the most important election yet.”

Several comments highlighted the episode's portrayal of the emotional and ethical dilemmas surrounding abortion. Viewers were moved by the characters' commitments and the difficult choices they faced, drawing parallels to real-life scenarios. These narratives resonated with many, who found the storylines both compelling and heartbreaking. As one user shared: “This episode definitely hit hard. I remember when *Roe vs. Wade* got overturned and I just cried as a mother who has a daughter who has no rights now.” On the other hand, some viewers criticized the episode for its perceived political bias and heavy-handed approach. Criticisms included over-dramatization and a lack of balanced portrayal of different viewpoints. Some users pointed out inconsistencies with the legal realities of abortion in New York, where the procedure remains legal despite federal changes. A viewer remarked: “I like *New Amsterdam*, but with this episode it is contradicting because it's based in New York.” There were calls for more nuanced storytelling that avoids vilifying any side of the debate. One user expressed: “I just wish they also showed the other side more honestly too instead of vilifying them. There are all sorts of interesting rea-

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sons people are against abortion other than they are some random bigoted over-religious extremist white man.” This lack of balance was seen by some as a disservice to the complexity of the issue and to the audience’s understanding.

Comments also addressed character portrayals and development. Dr. Wilder’s behavior received mixed reactions, with some viewers noting inconsistencies in her character. One user observed: “I respected it but it was so jarring coming from the same woman who violated people’s right to choose twice in episodes that were recent enough to still be freshly on my mind.” Another added: “Wilder in this episode didn’t feel like a character that had learned something from a previous episode and changed. It felt more like the previous instance was simply erased.”

Positive feedback included praise for Janet Montgomery’s (Dr. Lauren Bloom) performance, with a viewer stating, “Lauren’s speech was so good.” Additionally, Dr. Max Goodwin’s emotional communication with his child sparked discussion, with differing opinions on whether it was appropriate. While one viewer criticized it as “Max trauma dumping on his 4-year-old child,” another defended it: “He communicated his feelings in a way she could understand and didn’t go into any deep detail about it. I think he’s just comfortable communicating his feelings and talking about them.”

Reddit discussions reveal how the episode’s emergent narrative patterns generated significant social discourse, illustrating the feedback loop within the narrative ecosystem. Audience responses—ranging from empathy to critique—highlight the active role viewers play in interpreting media representations of sensitive issues. This diversity underscores the complex interplay between media and social discourse, where audiences help renegotiate societal perceptions.

Focusing on Reddit captures immediate audience feedback and sheds light on the short-term impact of the episode’s abortion narrative. This method emphasizes how viewer reactions can influence future storytelling, reinforcing the circular dynamic between media and discourse. The case of “Maybe Tomorrow” exemplifies how medical dramas swiftly integrate pressing social issues, shape public debate, and adapt to audience input within both narrative and production constraints.

### **Discussion and Future Research**

This article, as part of a larger research project encompassing a corpus of medical dramas with numerous episodes and extensive hours of video content, provides a focused analysis of the *New Amsterdam* episode “Maybe Tomorrow” to explore how sensitive social issues such as abortion are incorporated into serialized narratives and interact with social discourse.

One of the innovative aspects of the narrative ecosystems framework is its capacity to integrate different paradigms—sociology, semiotics, psychology, and biology—into a cohesive analytical model. By facilitating the interoperability of theories and models from various disciplines, the frame-

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work provides a comprehensive tool for understanding specific phenomena within the narrative ecosystem. This interdisciplinary methodology allows for a more nuanced analysis of how narratives function within society, acknowledging the complex interplay of various factors that influence both media production and reception.

Despite its insights, the study has limitations. First, it analyzes a single episode from one series, which may not reflect the full range of narrative strategies across genres. The focus on Reddit limits the scope to short-term audience reactions and does not capture the full diversity of viewer responses, making the analysis preliminary. Second, the qualitative approach, while rich in depth, lacks the quantitative rigor needed for broader validity. Quantifying narrative processes and social discursiveness demands extensive, time-consuming coding. To address this, our research group is testing automated tools—topic modeling for social discourse and multimodal LLMs for plot and character analysis. Though promising for large-scale studies, these tools currently complement, rather than replace, manual coding and may in future support a quantitative turn in analyzing narrative ecosystems.

Recognizing these limitations, future research could pursue several directions:

- Expanding the analysis by applying the framework to more cases, including genres beyond medical dramas, to assess its generalizability and identify narrative patterns in addressing social issues.
- Integrating long-term effects through longitudinal studies linking narrative ecosystems to sociological models like Cultivation Theory, examining how narratives and social discourse influence each other over time.
- Enhancing quantitative analysis by developing coding schemes and using automated tools to process large datasets, thus validating qualitative findings through statistical methods.
- Deepening audience analysis via surveys, interviews, and media reviews to capture a broader range of responses and enrich the study of social discursiveness.
- Refining theoretical integration by testing the model across diverse phenomena and incorporating interdisciplinary insights to better account for media–society dynamics.

## Conclusion

This article contributes to the understanding of how medical dramas integrate and reflect social issues within their narratives, influencing and being influenced by social discourse. The application of the narrative ecosystem framework to the *New Amsterdam* episode “Maybe Tomorrow” provides a concrete and analytical perspective on the interactions between media narratives and society. By highlighting the mechanisms of character embedding, alignment, and long-term memory, we demonstrate the dynamic

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and reciprocal relationship between narratives and social discourse. Our approach underscores the importance of considering media effects within a circular and mutually conditioning framework, rather than a unidirectional one. This perspective acknowledges that while media narratives can shape societal perceptions, they are also shaped by social discourse, policy changes, and audience feedback. The study illustrates how significant sociopolitical events, such as the overturning of *Roe v. Wade*, permeate media narratives and, in turn, how these narratives stimulate public discussion and potentially influence societal attitudes.

Advancing this research will require overcoming methodological challenges, such as scaling up quantitative analyses and refining automated coding techniques. The integration of interdisciplinary theories and methodologies will enhance the narrative ecosystem framework, making it a more robust tool for analyzing the complex interplay between media narratives and societal dynamics. Ultimately, this research contributes to a deeper understanding of the role of media in shaping and reflecting contemporary social concerns, emphasizing the active participation of audiences in the ongoing negotiation of meaning within the narrative ecosystem. By providing guidance on codes and methodologies to supplement the coding of larger corpora, this article lays the groundwork for future studies aiming to quantify and analyze the intricate processes within narrative ecosystems. As media landscapes continue to evolve, particularly with the advent of new technologies and platforms, the ability to analyze and understand the interactions between narratives and social discourse becomes increasingly crucial. This study not only offers insights into a specific case but also contributes to the broader field of media studies by proposing a framework adaptable to various contexts and capable of integrating diverse theoretical perspectives.

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