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The educational issues of male nursing workforce from the perspective of male nursing students: a qualitative study from Turkey

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ABSTRACT

Background: The aim of the study was to determine the effects of gender on vocational training of male students who were enrolled in two university undergraduate nursing programs in Turkey.

Methods: This qualitative study was carried out in 2014-2015. This qualitative study was carried out in University located in the northwest of Turkey and in University located in the west of Turkey in 2014-2015. The students were third and fourth year-students. In-depth interviews were conducted with students by using an interview guide composed of open-ended questions. The data were evaluated by using content analysis. The ethical approval was provided to conduct the study.

Results: Five main themes raised from the in-depth interviews: 1) the reason for preferring nursing; 2) opinions about nursing; 3) educational environment and education content; 4) the issues in the clinical practise and 5) the working areas of the male nurses.

Conclusions: The study pointed out the effect of the issues created by the gender discrimination on the education of the male nursing students along with the serious problems sprung from the insufficient infrastructure of the universities on nursing education.

Keywords: Male nursing student, Education, Gender inequality

INTRODUCTION

In recent years, there has been a rapid change in the health sector. One of these changes is the increasing number of males employed in the nursing, where the females have been dominant traditionally, since 1970s. In United States, the proportion of registered male nurses were about 3% in 1970 compared with 10% in 2011. In England, it has been reported that there has been a growth of 96% in the number of qualified male nurses between 1991 and 2001 compared with a 6% growth in the number of qualified female nurses. The gender imbalance between the employed nurses has been persistent despite the increasing number of male nurses.

The levels of registered male nurses for several countries are as follows: 7% in Canada, 10% in Australia, 10% in England, 4% in Ireland, and 23% in Iran.³⁻⁶ That the number of males leaving the profession is more than the number of females because of the low status of the nursing and its adverse image contribute to the gender imbalance.² The legislation allowing males to be employed as nurses in Turkey was passed in 2007.⁷ Following the new regulation, the number of male undergraduate nursing students increased fast from 27 in 2007 to approximately 15 thousand in 2015.⁸ Regarding the huge increase in the student number, one can say that male nurses will be an important part of the health workforce in Turkey soon. That anticipation brings up

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possible situations and problems such as effects of the socioeconomic and cultural features of Turkey, which keeps traditional social structure in a great amount, on the education process of male nurses and their work life, and issues originating from the gender of male nurses. A variety of studies indicates that male nurses feel isolated in academic and clinic environments, that there is no orientation programs or male instructors for male nurses and that students are faced with. 6,9-12 In the limited number of researches in which several groups such as patients and female nursing students were used, it has been reported that the problems related to the male nurses are the ones originating from sexism and from the perception that nursing is a job for women. 13 There are few studies which evaluates the problems that male nursing students experience during their education process from the perspective of male nursing student.¹⁴ The aim of the current qualitative study was to determine the effects of gender on vocational training of male students who were enrolled in two university undergraduate nursing programs in Turkey and their opinions and experiences about the problems they faced during their education process.

METHODS

This qualitative study was carried out in university in the northwest of Turkey and in University in the west of Turkey between 2014 and 2015. The study group consisted of 15 third and fourth grade students eight of which were from University in the northwest of Turkey and seven of which were from university in the west of Turkey. The data were collected by means of a thorough interview with the students in an isolated room. The interviews were conducted using an interview guide with all open-ended questions prepared by the researchers, and the interviews were continued until the decision was made that no new information could be obtained. Following an oral approval obtained from each student, a record device was used during the interviews. Content analysis was used in evaluation of the data. 15 The voice record of each interview was resolved and all the opinions expressed in the interviews were brought together according to the titles in the guide. Next, the text was read independently by researchers, themes and subthemes arising from the interviews were determined and they were coded. Following the comparison of the analysis by the researchers, themes and sub-themes were finalized and joint expressions were gathered together. The ethical approval was provided to conduct the study (protocol number 201305416-O1H). Also, the oral consents were obtained from all students for their voluntary participation to study.

RESULTS

Five main themes raised in the study (Table 1).

Table 1: Themes and sub-themes emerging from the study.

Themes	Sub-themes	Karabuk University students		Balikesir University students		Total	
		n	%*	n	%*	n	%*
The reason for preferring nursing	High probability of getting a job	8	53.3	7	46.7	15	100.0
Opinions about nursing	Functioning of the nursing as an assistant of the physician	8	57.1	6	42.9	14	100.0
	Attitudes and behaviours of the female professional members	2	33.3	4	66.7	6	100.0
Educational environment and education content	Lack of practice for the courses about woman health	4	57.1	3	42.9	7	100.0
	Inexistences of the conditions for learning-by-doing	2	66.7	1	33.3	3	100.0
	Courses including sex-based subjects	4	57.1	3	42.9	7	100.0
The issues in the clinical practise	Limited practice placement	3	60.0	2	40.0	5	100.0
	The male students were given different duties than the female students	8	53.3	7	46.7	15	100.0
	Discrimination by health workers, patients and their relatives	8	53.3	7	46.7	15	100.0
The working areas of male nurses	Administrative duties	3	60.0	2	40.0	5	100.0
	Had to work in the departments where a hard-work	2	50.0	2	50.0	4	100.0

^{*}Row percentage.

The reason for preferring nursing

The students, all of whom are from low- and middle-income families, stated that they did not have any detailed information of the nursing profession before the school started and that the main reason for choosing nursing was the high probability of getting a job or being employed in the public sector following the graduation.

"Frankly, I did not have any idea about nursing but that economic system makes me do. I had enough scores to enrolled in the engineering faculty or faculty of education but I did not prefer them as there were no job opportunities. That was my real reason, not because I liked it" Fourth grade student

Opinions about nursing

Students' thoughts about nursing mainly focus on the perceptions of the society that the nursing is a low status job and a feminine profession. Fourteen of students connected the main reason for low status of the nursing to the physician-centred structure of the health system and functioning of the nursing as an assistant of the physician rather than as a professional job. Six students thought that the adverse perception of the nursing originates from the attitudes and behaviours of the female professional members. Students mentioned that female nurses are inconsiderate to patients, dependent on the physicians and have insufficient organization skills compared to the male nurses. All of the study group considered that male nurses will contribute to a possible increase in the status of the profession.

"...the physician is always at the forefront, we are just people who take a temperature, check pulse, check blood pressure in public's view." Fourth grade student

The majority of the students (n=11) stated that they were faced with sarcastic comments such as "does a man be a nurse?" made by their relatives and friends in the first years of their education because of the fact that nursing is seen as a female profession. They also stated that the patients and their relatives were difficult to get used to male nurses and that they often referred to them as "doctors" in hospitals.

"In the beginning, I was thinking if I could do it because it was seen as a profession for females. When I was asked which department, I was enrolled in the university entrance exam, I used to say health officer?" Fourth grade student

Educational environment and education content

All students pointed about the insufficient number of faculty member and physical resources against the excessive number of students, especially the lack of practice for the courses about woman health, the difference between the male and the female students with

the respect to the exam results regarding education medium and the education content. Seven students described the unexistence of the conditions for learningby-doing because of the limited utilities of the laboratory as an important problem.

"Physical conditions are very insufficient. Classrooms are limited and crowded. We do not have laboratory utilities like those in other universities, materials are also insufficient. We do not do one-to-one practice, just watching. Even we do watching in the laboratories." Third grade student.

Three students pointed out that the instructors placed emphasis on the non-communicable diseases more than necessary, that they forgot about what they learnt because it was almost possible for them to encounter such diseases in their working places, and that the time spent on a disease in the classroom had to be arranged according to the extensiveness of the health problems. Seven students said that male students did not attend to the courses including sex-based subjects, that they did not find a chance to apply especially what they learnt about women' reproductive health, and one of the students describes that course as 'perfunctory'.

"They teach us things we will never do, if we do not do why do they teach? We cannot treat and care women in the field, but we deal with male patients." Third grade student.

The issues in the clinical practise

The experiences and the views of the students about the clinical practice were focused on three subjects. The first of these was the limited practice placement and the insufficient support about the practicing. The second one was that the male students were given different duties than the female students. The last one was that male students were faced to discrimination by health workers, patients and their relatives during the practice of women's health due to their gender.

Five students stated that practice placements became more insufficient because of the increase in the student numbers every year exceeding the capacities, that the instructors did not pay attention to the field work as much as theoretical part of the courses, and that they were generally asked to watch only because of the worries over making mistakes in the practice placements. All of the students said that during the clinic placement the male students were generally used for heavy works such as lifting and carrying patients, they were worked in intensive care, emergency, orthopedy units, or they were used for works which were refused by female nurses such as dressing.

"They try to place us in positions where they can easily use males for heavy-works such as orthopedy and emergency clinics. In my opinion, we should be trained in all departments. Ok, we are useful but this is discrimination and it is not good." Third grade student

All of the students stated that they were faced with sex discrimination during the practice placements, especially placements of women health and diseases, by the health workers, the patients and their relatives. Noting the discrimination by the health workers, six students stated that they were not allowed to the delivery room and the family planning polyclinics, that they were removed from the women patients' rooms during the during caring activities in hospital clinics, and that they could not examine neither a pregnant nor a puerperal woman in a primary care centre or in a hospital. The students mentioned that sex-discrimination based attitudes and behaviours made them to lose their motivation.

"I did not monitor any pregnant neither in the primary care centre nor in the hospital during the internships of women health and diseases, I did not perform any Leopold manoeuvre, I did not have any Intrauterine device practice. I did not see any childbirth or caesarean section." Third grade student

Except for one student who accepted such discrimination and said, "if had a wide, I would not want a male staff to take care of her", the whole study group complained about the mentioned sex-discrimination. Two students, on the other hand, said that it was difficult for them to take care of women even if they did not support the discrimination. One of these students mentioned the pressure coming from his religious belief.

"They met us by saying that they did not want male nurse. Frankly, I did not want it either, I considered it to be a kind of sin." Fourth grade student

The working areas of male nurses

Five of the students said that males were more successful than females regarding administrative duties and that the administration offices in nursing had to include males only, while four students pointed out that the male nurses had to work in the departments where a hard-work was needed such as the emergency, the orthopedy, the operating room and the intensive care. One student said that male nurses could be employed in the rural areas where the transportation was difficult at the primary level. Other students mentioned that male nurses had to be involved in all parts and levels of the work force.

"The manager should be a male, because, he could make them listen more. His bearing, talking... I do not think females would be influential. People pay attention to males more. Family head is a male, the manager could be a male, too." Fourth grade student.

DISCUSSION

The findings of the current study, which carried out with the aim of identifying the issues raised during the

education process of the male nurses recently joined the health workforce in Turkey, betrays the gender based difficulties the students faced as much as the important problems about the quality of the nursing education. These issues lead to serious risks in professional competence of nurses, the most important members of the health work force, as much as in the students' work lives because of the psychosocial risk factors that the students are faced and of possibly increasing the risk factors.

The study shows that Turkey's socioeconomic structure has a decisive role in enrolling of the students, whom families are totally from low and middle income, in the nursing program. All of the students mentioned that they preferred the nursing because of high probability of being employed and job security. The health sector has been reported to be one of the areas in which the unemployment rate was the lowest (i.e. 2%) in Turkey, where the graduate unemployment rate was 12.9% and one of every four unemployed people was a university graduates in 2014, confirming the students' thoughts. There are three basic reasons for males' preferring of nursing pointed out in literature. The first one is the approval of the people around the student such as family and the friends who may influence the student's decision, the second one is attractiveness of the nursing as a paying and secure job with the career possibilities and a high probability of being employed in civil service offered by it and the final one is the desires of self-sacrifice, helping people, and providing them with care. 10,17-24 The students in the current study see the nursing as a low status job in the society. According to them, the reason behind that is the weakening of the nurses' position in the health organization and the society by the physician-cantered health system and female nurses' staying powerless to changing the situation. Numerous studies point out low status and powerlessness of the nursing. ²⁵⁻³¹ The main reason behind the low status, the powerlessness and the vulnerability of the nursing in the health organization as much as in the community is its reputation as a woman's work.³² In historical course, the female culture shaped in the societies moved to another dimension in which the value of woman and her work became worthless with the introduction of the capitalist economic system.³³ As seen in this study, the humiliating of the most students in beginning of their education by their environment and even the shame they feel when they say they become a nurse are a good reflection of the perception "nursing's being a low status woman job" and "worthless of women". Evans reported that men were faced with a negative feedback from other males, including fathers and male friends, when sharing their decision to enter nursing.³⁴ The view of some students, such as increase of the status of nursing by means of male nurses or male nurses' being best for the administration, can be interpreted as a reflection of the male-dominant society structure following the historical course. In the study, the students pointed out the several important issues about infrastructure of the universities which would affect not only male students' but also female students' gaining of the required qualifications. The students complained about overpopulation of classes, absence of the laboratories where they may make use of learning-bydoing, overpopulation of students compared to limited number practice placements, and the insufficient support given them in making practice. There has been a continuous increase in the number of universities and in student quota in Turkey since 1980. The number of universities increased from 27 to 175 from 1982 to 2013. Many state and private universities established, especially in 2006, and the number of students increased from 2.5 million to 5.5 million, more than double, from 2006 to 2013.35 There were 133 nursing undergraduate schools, 92 of which were in the state universities while the rest was in the private universities, 57 master programs, and 30 doctorate programs in Turkey in 2015. The rate of increase in the student numbers is as much as 19.7 times while it is eight times in the number of faculty members in the last 20 years.³⁶ Training in nursing gained importance to meet the demand of nursing services which originated from the market-driven healthcare reforms and changing healthcare priorities in Turkey. Nursing workforce is high on the policy agenda given increasing demands for nursing skills to meet. In 2014, the number of nurses including community health technician was 152,254 in Turkey. The target number for 2023 is about 315 thousand and 50 thousand of that number is estimated to meet the demands of the private sector. Accordingly, the number of students to be enrolled in nursing schools is estimated at 8,214 per year.³⁷ While the quantitative increase in the number of universities and students has been achieved, the quality problem has arisen. Health workforce, the most important part of a health system, is the basic ingredient in determining success of the system. Therefore, the quality of the health workforce is important than its quantity and the aim of training qualified health workforce cannot be abandoned under any circumstances.³⁸ Graduation of nurses, which are the critical member of the health workforce, without gaining necessary knowledge and skills from universities is a serious risk to the community health. The most complained subject by the students recorded during the study is the gender discrimination students faced by the health workers, the patients and their relatives especially during the practice about women health. In Turkey for many reproductive health services, access to female providers is an important determinant of women's health service utilization. Reproductive health services are not set up so as to encourage male involvement because of gender issues and religious attitudes. That the male nurses do not gain enough knowledge and skills about services such as care before and after delivery and family planning, which are among the basic health services, or that they are not able to have a chance to practice their knowledge possesses a substantive problem in terms of quality and quantity of the services given at all levels of health organization.²⁹ Besides, some studies show that male nurses have psychosocial problems based on gender discrimination. In the studies, it is reported that the difficulties experienced by students during care and touching the patient cause lack of motivation, adverse effects in their profession, anticipatory anxiety, feeling of

isolation and alienation. 22,23,29-31,39,40 A typical finding of the current study was the opinion of a student supporting sex-discrimination, and remarks of two students' thoughts of being ashamed and committing a sin when giving services to female patients. It is obvious that more effort should be made to prevent gender discrimination in Turkey having preserved traditional social characteristics in a great amount and with a tendency to become conservative in recent years.

Another important finding of the study is that the clinics where male nurses worked and the works they did in clinical practice are different from those of female students. Similar to the findings in this study, in other studies it is reported that male nursing students are assigned to work requiring force and face with limitations based on their sex in the clinical practice areas. 4,6,10,14,23,41 The ideas that the males are stronger and the male students are not suitable to the carer role are merged to lead their assignment to the works fitting gender roles. Compared to the female nurses, the male nurses are not efficiently taking part in caring patients and they feel that they should meet the expectations of the patients and female colleagues. ^{29,31,40,42}

First one is that, like in the other quantitative studies, the findings obtained in this study cannot be generalized. However, the study provided comprehensive and in-depth understanding of the perceptions and experiences of male students about their educational process. The second limitation is that a triangulation cannot be made and the study involved only male students. Comprehensive studies reflecting views of female students, their instructors, nurses and the other health workers, and service takers are needed.

CONCLUSION

As a conclusion, the findings of the current study reveal the effects of the problems created by the gender inequality on the training of the male nurses together with the serious issues about nursing education in general. A suitable learning environment which does not allow any discrimination against male nurses should be provided together with long range planning to overcome the gender inequality.

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Institutional Ethics Committee

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