



INTERNATIONAL JOURNAL OF CREATIVE RESEARCH THOUGHTS (IJCRT)

An International Open Access, Peer-reviewed, Refereed Journal

NURSING: Men in Women's profession.

Dr.Giridhar Rao M S. Associate professor of sociology

Abstract: The popular image of nursing as a feminine profession is challenged by the entry of men into nursing profession. Though the representation of men in this profession is far less, the profession tends to accept men into its practice and makes no distinction between sexes in terms of the duties concerned or professional authority. In this context men's position in nursing profession is analysed to throw more light on the influence of gender on their activities.

Over the years, the nursing profession has undergone several changes in its nature and functions. Started with the service of ailing patients in the hospitals, including activities such as bed making, cleaning, preparing food and the like, nursing profession has now included in its functions such aspects as managerial and administrative tasks. With the growing specialisation and super specialties in the practice of medicine, the nurses who form an important part of the teamwork of health care systems, must also keep pace with the growing need for specialisations in nursing such as obstetrics and pediatrics, psychiatry, neuro, burns and trauma. The nursing functions tended to be clearly distinguished from non-nursing work on account of increased specialisation of treatment, skills and knowledge. The concept of private practice in nursing is also an important emerging trend in the profession. With all these developments, there is also a tendency towards disgenderisation of nursing profession. The attitude of the general public towards nursing as feminine profession has undergone change and more and more men seek a career in nursing. Although the number of male nurses are still significantly low, there is definitely a change in the attitude towards men entering into this profession and accepting all areas of nursing including obstetrics, gynecology and pediatrics. Women nursing professionals themselves have begun to accept men's career choices in nursing. With the emergence of graduate and post-graduate programmes of learning in nursing, more and more men have begun to take up nursing education to seek a career in nursing practice in India and abroad.

It is observed that the representation of men in nursing profession is very low. In spite less number of male nurses available in each hospital, fifty male nurses are selected for this study. Hence, data on important aspects of men's participation in nursing are assessed from a total of 210 nurses which includes female nurses as well. Questions are asked on the entry of men in nursing, career options for men in nursing, and stress and dissatisfaction in nursing.

Nursing education, which offers diploma, graduation and post graduation programmes of study in nursing, now a days opens up its doors for more and more men. A sizable number of male students are pursuing their career in nursing education. However, men's chances of entry into nursing practice are still restricted. The representation of men in nursing practice in hospitals is proportionately very low. Their representation does not exceed 10% of the total number of nurses in each hospital. In some hospitals there are no male nurses at all. Even though the schools and colleges of nursing admit male students, the hospitals have relatively negligible number of practicing male nurses. This is explicitly shown by the low representation of men in the profession. Hence, the respondents are asked about the equality of opportunity for men and women. Fifty percent of the respondents deny the statement that there is equal chances for both the sexes, whereas only 42.28% agree and the rest are neutral.

Table.1**MEN'S CHANCES OF ENTRY INTO NURSING**

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Total
Equal chances of entry	16(7.62)	73(34.76)	15(7.14)	102(48.57)	04(1.90)	210(100)

Less number of men in nursing profession is generally observed in all hospitals. It is admitted by the respondents that men's chances of entry into the profession is not favourable. However, the respondents do not consider lack of awareness as the cause for their low representation in the profession. This is asserted by 59% of respondents voting against the lack of awareness of men. The following table shows the result

Table.2**MEN'S AWARENESS OF OPPORTUNITY IN NURSING**

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Total
Lack of men's awareness of opportunity in nursing is responsible for their low representation	14(6.67)	51(24.29)	21(10)	112(53.33)	12(5.71)	210(100)

Ever since the beginning of the profession, it has been women who dominated the nursing profession. The number of men taking up nursing was significantly low due to various reasons. However, the respondents in this study who are overwhelmingly women have indicated that women's lobbying has successfully kept the level of men low in this profession. The data indicates over 79% of the respondents agree with the statement that women's lobbying plays an important role in restricting entry of men in nursing while 16% have disagreed.

Table.3
ROLE OF WOMEN'S LOBBY

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Total
Less number of men in nursing is due to women's lobbying in recruitment	30(14.29)	137(65.24)	08(3.81)	25(11.90)	10(4.76)	210(100)

Nursing as a caring profession needs more intimate contact and attention with the personal, physical and emotional needs of the patient. Sex of the patient is an uninvited guest in the process of interaction between nurse and patient. With the participation of men in nursing profession, sex of the nurse has also begun to play an important role in assigning the duties to the nurses. Hence the respondents are asked to indicate whether all areas of nursing can be made open for men. The result indicates that over 69% of the respondents agree to say that all areas can be open for men, while 12.38% strongly agree with this. As many as 14.76% have disagreement with the issue. The rest are neutral.

Table.4
OPENNESS OF AREAS OF NURSING FOR MEN AND WOMEN NURSES

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Total
All areas of nursing can be made open for men	26(12.38)	145(69.04)	08(3.81)	27(12.86)	04(1.90)	210(100)

Although the doors of nursing education and practice are virtually open for men and women, it is still women who are dominant. In this context, the respondents are given the option to say whether a man can be as good and efficient a nurse as a woman. The data shows that over 63% of the respondents agree, while 9.52% strongly agree with the statement that men are as good as women to be efficient nurses. As many as 21% of the respondents opposed the statement.

Table.5
MEN AS EFFICIENT NURSES

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Total
Men could be as good and efficient nurses as women	20(9.52)	133(63.33)	12(5.71)	39(18.57)	06(2.86)	210(100)

Men's Work and women's work in Nursing

In order to ascertain whether any part of nursing is branded as men's work or women's work in nursing, the respondents are asked to indicate the areas of work which could be suitable to male nurses, female nurses and to both sexes. The data indicates that all the ten important areas of nursing are suitable for nurses of both sexes. The respondents indicate that almost all areas of nursing could be open for male and female nurses indiscriminately. The table 7.6 below shows the position of different areas of nursing with regard to sex segregation.

Table .6
MEN'S WORK AND WOMEN'S WORK

	Area of specialization	Males only	Females only	For both	Total
1	Orthopedics	47(22.38)	-	163(77.62)	210(100)
2	Pediatrics	-	82(39.04)	128(60.95)	210(100)
3	Obstetrics & Gynecology	-	187(89)	23(11)	210(100)
4	Psychiatry	82(39.04)	11(5.24)	117(55.72)	210(100)
5	Medical	23(10.95)	23(10.95)	164(78.09)	210(100)
6	Surgical	35(16.66)	-	175(83.33)	210(100)
7	Out-patient dept	23(10.99)	23(10.99)	164(78.69)	210(210)
8	Intensive care unit	08(3.81)	06(2.85)	196(93.33)	210(100)
9	Trauma & Emergency	23(10.95)	-	187(89.05)	210(100)
10	Community Nursing	-	82(39.04)	128(60.96)	210(100)

The data indicates that out of the ten specified areas of nursing, 89.04% of the respondents indicated obstetrics & gynecology as suitable for female nurses only, whereas 10.96% have indicated it as suitable for both male and female nurses. In all other areas of nursing, more than 50% of the respondents indicated the suitability of these areas for the nurses of both the sexes. The above table gives credence to the fact that most of the areas of nursing are suitable to nurses of both sexes. Responses indicating any specific areas as suitable only to particular sex are relatively low in number compared to those suitable for both sexes. However, obstetrics and gynecology are considered by the nurses as an area of nursing more specific to female nurses.

Nursing as a gender-free profession:

Nursing as a distinct occupation of trained persons was popularized by Florence Nightingale who along with 40 other trained women, provided nursing care to the wounded soldiers during the Crimean wars in the late 1850's. Nightingale not only succeeded in establishing the job of nursing the sick by trained persons as an essential ingredient of health care, but also nursing as a distinct occupation separate from the medical, a trained woman's job. The identification of nursing as a trained woman's job was supported by two considerations. First, the previous ideological perception of all women as being 'natural' nurses has been modified by the perception that all such 'natural' attributes of a good woman remained innate until proper education and training - either at home or in other institutions - were imparted. Hence, all women could be taught to be nurses. Second, the demographic trend of the time consisted of 'surplus women' in the middle class who were seeking respectable non-industrial work. Nursing, made respectable by Nightingale, and sanctioned by religion, fitted in perfectly with the time.

Nursing became a single stratified occupation of women with organisationally autonomous hierarchy. With the domination of medical profession over nursing, we find a direct ideological projection of the sexual division of labour in the occupational roles, wherein medical profession is seen as a masculine function irrespective of biological sex of the doctor, and nursing as a feminine function irrespective of the biological sex of the nurse.

This genderisation of health care function has made nursing predominantly a feminine occupation at least numerically, if not in terms of functional requirements of the nursing duties.

Impact of gender on nursing profession has been found since the beginning. Nowhere else the gender role has been acted out more faithfully than in nursing.

Contrary to the expectations, the entry of men into nursing profession has changed the popular image of nursing as a feminine profession. But it is not to say that the male nurses are largely responsible for changes in the fundamental values and assumptions that form nursing theory. In fact, it is still women who are responsible for the elevation of the status of nursing profession in general. The 1970s and 1980s have been important years for the nursing profession. The Salmon report in 1965 had created a new management structure. The 'First line management' consisting of staff nurses, senior enrolled nurses, and ward sisters who are responsible for direct patient care. 'Middle management' composed of nursing officers and senior nursing officers, dealt with planning and the provision of resources for schemes which first line managers would carry out. 'Top management' consisting of principal nursing officers who are responsible for policy making. (Pat Hodgson 1986:47-48)

Emergence of high technology and more specialisations gave a new look to the profession of nursing. Emerging areas like nursing management and nursing administration are responsible for this step towards professionalisation. All these developments have culminated in a changed outlook towards nursing as a gender-free profession, wherein more and more men could seek a career in nursing.

Conclusion:

Men in nursing are marginal both in number and in overall influence on the profession. Numerically their number does not exceed five to six percent of the total permanent staff nurses of hospitals. However, more number of male students are entering into nursing education in order to grab the opportunities abroad. The respondents in this study assert that men's chances of entry into nursing profession are not equal to those for women. This has been corroborated by them by asserting that women's lobbying in recruitment and pressure on the authorities to keep men's recruitment at a lower rate. However, they affirm that lack of awareness of men with regard to opportunities in nursing education and practice is not the cause for their low representation. Supplement to this, the respondents consider men as equally efficient to be a nurse as women, and agree to a large extent that all areas of nursing care can be made open for men.

The respondents do not rank any particular area of nursing as exclusively assignable to either males or females. Most of the areas of nursing are considered to be accessible for male as well as female nurses. Obstetrics and Gynecology are the twin areas of nursing care which are not yet assigned to males. However, the social conditioning of the patients and the prevailing sex norms of the society are responsible for classification of these areas as specific to female nurses only rather than the actual nursing tasks involved in it. As a matter of fact, when the medical profession does not make any difference in assigning its functions on the basis of the sex of its incumbents, the nursing profession, which goes very closely with the medical profession can also be gender-free in all respects.

1. Adayadil, Sr. Marianne : *'Nurses Today and Tomorrow', Health Action*, Aug. 1997. Vol. 10, No.8:pp 12-15
2. Advani, Mohan : *Doctor-Patient Relationship in Indian Hospitals*, Sanghai Prakashan, Jaipur, 1980.
3. Agarwal, K. C : *'Six Challenges for the Nursing Profession', Hospital Administration*, June 1978.
4. Aiken, Linda H, and Doglas M Sloane : *'Effects of Specialization and client Differentiation on the status of Nurses: The cases of AIDS'. Journal of Health and Social Behaviour*, 1997, 38-3, Sept. pp 203-222.
5. Allen, David G : *'Professionalism, Occupational Segregation by Gender and Control in Nursing', Women & Politics* 6:3 Fall, 1986 pp 1-24.
6. Altschul A. J : *Patient-Nurse Interaction*, Churchill Livingstone, Edinberg, 1972.
7. Austin, Rita : *'Sex and Gender in the Future of Nursing I and II', Nursing Times*, 25 Aug & Sept. 1977 Pp 113-116, 117-119.
8. Banton, Michael : *'Roles : An Introduction to the study of Social Relations'*, Tavistock Publications, 1969 pp 28.

9. Barnes, Elizabeth : *Psycho-Social Nursing*, Tavistock Publications, London, 1968.
10. Blau, Peter. et al., : *'Occupational Choice: A Conceptual Framework', Industrial and Labour Relation Review*. Vo. 9 (July, 1956). Pp 531-543.
11. Blumberg, Burton. S. : *An Analysis of Job Satisfaction of Registered Nurses*. MacMillan New York, 1970.
12. Bogardus. E, : *Sociology*, The Mac Millan Co, New York 1954, p-164
13. Boyd, Monica : *'Feminization of Paid Work', Current Sociology*, Volume 45, No.2, April 1997, pp. 49-73
14. Brandis, Louis : *Business – A Profession*, Boston, Small, Maynard and Co., 1914.
15. Brodt., D. E. : *'The Neophyte Nurse, A Role Expectation Study', Nursing Research*, Vol 13, Nos.1-2. 1964
16. Brody, E. M. : *'Patient Care as a Normative Stress', The Gerontologist*, 25(1) 1985, p 19-29.
17. Bullock, R. P : *'Position, Function and Job Satisfaction in Social System of a Modern Hospital', Nursing Research*, 1953, pp 4-14
18. Carr Saunders. A. M., : *Professions: Their Organizations and Place in Society* The Clarendon Press, Oxford 1928 p-4.
19. Carr Saunders A. M., & P.A. Wilson : *The Professions*, Oxford. The Clarendon Press 1933.
20. Chandani, Ambika : *The Medical Profession - A Sociological Exploration*, Jaisons, New Delhi, 1985.