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ABSTRACT

Background: The evolution of nursing education into an academic curriculum and the growing interest of men in nursing have been significant landmarks in the development of a 'female' occupation. Chilean nursing is considered as the leading example of nursing education in Latin America, demanding a five-year training on a full-time university programme. The consequences of education, however, are assumed as more egalitarian opportunities, disregarding the latent replication of structures that perpetuate inequalities.

Objective: To comprehend the socialisation of male nursing students and its relation with their masculine identity and the construction of inequalities in nursing education.

Methods: We draw upon interviews undertaken with beginner and advanced nursing students from a Chilean university. Approval was obtained from the relevant Ethics Committee. The data were organised to allow the development of concepts by using the Grounded Theory approach.

Results: The analysis uncovers paradoxical results of nursing education and its ineffectiveness in preventing gender-based inequalities. The interest in empowering nursing politically may lead to favour an increasing number of men entering nursing in ways that facilitate male students' progress. Furthermore, there exist discourses of compassion that feed consideration for male students, engendering in the process the prospect of professional success and the gravitation into strategic positions in the employment market. These are mechanisms that reproduce earlier gender-based inequalities in nursing.

Conclusions: In the light of the social reproduction theory, the academisation of Chilean nursing seems to be built upon historical gender asymmetries. Although the interest of men in embracing a career in nursing may have a meaningful resonance with the transformation of contemporary society, this process needs a judicious examination in order to protect academic integrity and, ultimately, prevent the reproduction of those inequalities in question. This analysis offers a perspective for understanding social patterns embedded in the practice of nursing education in Chile and elsewhere.

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Introduction

The twentieth century witnessed a shift in nursing education in Chile, moving from an apprenticeship model into a scientific curriculum. Building on the structural approach to the professions (Flexner, 1915), nursing has endeavoured a concerted attempt to gain full professional status, and accordingly paid attention to expand self-regulation, to intellectualise the nursing practice, and to obtain academic credentials, and in so doing, nurses claim higher rewards and greater life opportunities.

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Structural concerns, however, make up a very limited approach to define a profession. Professions are components of a system of occupations (Abbott, 1988, 2002, 2010), by which is meant complex interrelations connecting the occupations socially. Educational programs are in fact rooted in the logic of healthcare organisations, shaped by self-interpretations of each professional group and structured as divisional institutions.

Although nursing schools have moved from hospitals into universities, what nurses do in hospitals is taught by nursing lecturers in university rooms, and then nursing students replicate this knowledge in hospitals. This circularity may be understood in reference to the social reproduction theory; Bourdieu and Passeron (1970) argued that the educational system is an apparatus of social reproduction, not of social mobility but of replication of domination patterns and social inequalities. As a 'female' occupation, gender consciousness has been a powerful factor in nursing identity, so are gender relations in the development of modern nursing. The academisation

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of nursing education may thus serve as a means for increasing awareness and raise important issues concerning the reproduction of gender inequalities.

While there is evidence concerning inequalities at workplace, little is known about how this can possibly originate earlier through nursing training practices. This article thus aims to bridge an important gap in the current literature on nursing education, as the impact of academisation on gender inequalities has been taken for granted, in the conventional assumption that the access of women to scientific degrees reflects the development of a given society. The key question in this discussion is: to what extent are nursing gender relations shaped by the socialisation process within the academy?

We examine this problem by drawing upon a corpus of interviews, focusing on two concepts of relevance to this analysis: masculine identity and gender relations. The article concludes by inviting a discussion on the particularities of nursing education and its linkage with social equality, which might have a strong resonance elsewhere.

Background

Gender-based Social Inequalities in Chile

Major political reforms have undergone in Chile over the past five decades. Despite the manifest development of the Chilean economy and its integration into the global market, social inequalities still persist. Substantial income differences (Morley, 2001; Castillo, 2011), as well as geographical (Bicudo, 2011), health (Ewig and Palmucci, 2004; Fuentes et al., 2013) and educational inequalities (Levin, 2011; Mizala and Torche, 2012) have framed the making of the early twenty-first century's Chile.

Intriguingly, the concentration of income in the wealthiest segment of the population seems to be intertwined with an 'existential argument' that justifies and legitimates social inequalities in that country (Castillo, 2011), suggesting that the legitimacy of social differences is ultimately embedded in cultural self-interpretations of social groups.

Gendered underpinnings, in turn, inform social differences insofar as women are largely grouped in the service sector, typically in teaching, social work and nursing. This is partly because of a gradual move of women from domestic work to the employment market, therefore taking on 'helping' vocations (Nagl-Docekal, 2004), and also partly because of conventionalisms that tend to favour men for authority representations (Ridgeway, 2011) and how they are perceived as fitting chief posts, structuring in the process rather rigid patterns of career choice.

Recent evidence has shown that women's labour supply in Chile has grown steadily since 1990 against relative stability for men, although it remains fairly low in international comparisons, standing at 37 per cent, even significantly lower than in other countries in Latin America (Contreras et al., 2011). Additionally, earlier studies (Contreras and Plaza, 2010, 2006) suggested that conservative attitudes in the country influence female labour force participation.

While this backdrop is relevant as far as it goes in the socioeconomical arena, what are the implications for the nursing occupation? In the following, we will provide relevant background information on the participation of men in the nursing employment market. We then present the methods and main findings of a qualitative study, and discuss patterns that consistently surfaced during the production and analysis of data.

Men in Nursing: Masculinity at Workplace

Men in conventionally female occupations have not only been a concern of little attention (Pullen and Simpson, 2009) but also an often neglected phenomenon in the study of social inequalities.

Nursing in Chile is also a predominantly female occupation. By using the Chilean Nurses Association's (2013) records and the public statistics on education and employment (Ministry of Education of Chile, 2013), it is estimated that between 6 and 10 per cent of Chilean nurses are men. Once perceived as a type of 'intrusion' into a domain forged by women, male nurses are today an integral part of the nursing family.

There is a common belief that male nurses have shown positive results in their careers. This may be understood through what some authors describe as a 'monopoly' of attractive positions (Williams, 1993; Budig, 2002) resulting in higher rewards than those of women, in both wage and image. Male nurses seem to benefit from the assumption that, as men, they should increase their leadership, and therefore adopt a more competitive attitude towards their work (Floge and Merrill, 1986; Heikes, 1991), reaching strategic positions in hospital boards (McMurry, 2011) or grouping together in high-technology specialties (Williams, 1995; Evans, 1997; Simpson, 2004; Connell, 2012). Undoubtedly, this echoes the widespread idea that women are emotional and fragile, while men are strong, rational and able to control their emotions (Evers, 2010). Similarly, authors such as Brown (2009) claim that male nurses find themselves in a dilemma between their masculine identity and the nursing role, which seems connected to a pattern of professional specialisation. The public image of the nurse is in fact associated with womanhood and womanly qualities (Heldens and Schilling, 2012.; Kelly et al., 2012), portrayed by the prolific imagery in the media market (Almodóvar, 2002; Brixius, Dunsky and Wallem, 2009; Harding, 2007).

Despite that these claims have shed light on gender inequalities in nursing at workplace, there is little evidence in relation to nursing students and how nursing education might engender this phenomenon in an early stage of the socialisation process. Integrating this perspective in a closer analysis may bring important insights to this discussion.

Study Design

The inception of this study is in part due to explorations of nursing identity formation in Latin America, spanning the period 2009 to 2010. Although the project considered a standardised survey and interviews, the interviews are at the centre of this article.

The study involved individual (22) as well as group (6) interviews with beginner and advanced nursing students (separately) from a Chilean university. By this we aimed to balance two contrasting points of the students' socialisation process, namely the 'ideal nursing' communicated to beginners, and the 'real world' nursing experimented by advanced students. The students were chosen purposively as informants in an earlier stage of a larger study exploring nursing identity construction; the average age was 19 years and 23 years, respectively. As key informants (Denzin and Lincoln, 2000), they expressed an interest in the core theme of the project, seemed to be knowledgeable about it and were willing to communicate a piece of information they found critical for the future of the nursing discipline.

Based on a semi-structured guide that reflected the literature on gender and professional identity, the interviews ranged between 60 and 120 minutes, were tape-recorded, and included males and females separately to contrast their views on gender interaction. As for the group interviews, each group was mixed-gender.

Access to the study participants was reached after obtaining the approval of the relevant Ethics Committee. To meet the condition that consent should be informed, each interviewee was given a description of the study and then asked to discuss his/her experiences within a nursing context.

In the study of gender interactions, it was important to consider the development of processes, concepts, and patterns, therefore the Grounded Theory approach (Corbin and Strauss, 2008; Charmaz, 2006) provided the most appropriate means for conceptual integration. The codification process was rethought, readjusted and refined until reaching a meaningful answer to the research question.

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