

## The Experience of Newly Enrolled Egyptian Male Nursing Students into Maternity Nursing Curriculum

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**Abstract:** All over the world, nursing is considered a feminine career. However, due to the national and international demand for highly qualified nurses, male were encouraged to join nursing profession. Although, the presence of males in nursing field has been gradually raising, they are remained a small percentage of the nursing population. This study aimed to explore the experience of newly enrolled Egyptian male nursing students into Maternity Nursing Curriculum, Exploratory descriptive design was use to explore the lived experience of students. The study was conducted at Maternity & Gynaecology of Nursing Department, Faculty of Nursing, Mansoura University. All male maternity nursing group of the third year bachelor of nursing program were enrolled (n= 40) and all academic and clinical teaching staff (n=10).Data were collected by using Semi structured student questionnaire sheet which cover all items related to experience of male nursing students into maternity nursing curriculum. Also Focus group interviews with students, and academic and clinical teaching staff. Results: The majority of the students were preferred to take their training in lab area (65%), and (37.5%) of them were preferred the training in family planning area. The perineal care was the first embarrassing procedure (62.5%) followed by breast care (32.5%). Most of students (67.5%) reported acceptance with restriction from mothers toward them, and only 5% of them were been refused by mothers. More than half of the students (57.5%) and (42%) reported accepted attitude from both academic and hospital staff respectively while (27.5%) of students reported restricted attitude from both academic and hospital staff. Conclusion Research indicates that male nursing students are experienced gender barriers during their learning. Recommendation: Research must continue to explore the attitudes of male nursing students and the barriers they are experienced in order to improve and optimize the quality of education.

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### 1. Introduction:

Male nurses are professionals who care the same way as female nurses, however stereotyping them as homosexuals does exist exposing male nurses to homophobia in the workplace (Traacey & Nicholl, 2007). This is why male nurses represent just a small fraction of the nursing workforce in Egypt (Yaling, 2007). For a long time, there were lack of desire and enthusiasm among students in Egypt to study nursing because of the stigma of nursing profession which may plays one of the major obstacles for choosing nursing career (Keogh & O'Lynn, 2007). In addition to the popular notion of nursing is not a men profession also, admission regulation among faculties of nursing and nursing schools since nightingale movement of modernize nursing, men were excluded from entering profession, seem to be other obstacles towards bringing more men to the profession (O, Lynn, 2007 & Eswia & EL-sayed, 2011). Recently there are many factors influencing the professional presence of male in nursing to a great extent such as health care needs, nurse's shortage, recruitment and employment chances and the advancement in profession (Williams, 2006). In the last few years, some segments of public were encouraging students to choose nursing evidenced by

increase the national and international demand for highly qualified nurses and to move to a more balanced profession (Whittock & Leonard, 2003).

Although, the presence of males in nursing field has been gradually raising, they are remained a small percentage of the nursing population (Burkhardt & Nathaniel, 2007). As male enter nursing education they may encounter role stereotyping and gender bias through the assumption of stereotypical notions of caring by nursing faculties. Encouraging male students to study nursing without addressing and studying the stigmatizing factors may form a barrier for their career and affecting women care. Also, studies have shown that male experience the process of nursing differently than female (Anthony, 2006 & Harding, 2007).

Very little research has been done on male nursing students learning experiences (Eswia & EL-sayed, 2011). There is still much to be learned about such experiences as new phenomena. Studying male nursing student's experiences has the potential to shape the learning in higher education in general and nursing education in specific.

**Aim of the study**

This study aims to explore the experience of newly enrolled Egyptian male nursing students into Maternity Nursing Curriculum.

### Research Question

What is the experience of newly enrolled Egyptian male nursing students into Maternity Nursing Curriculum?

## 2. Subjects and Methods

### Design and Setting

An exploratory descriptive design to explore the lived experience of students. The study was conducted at Maternity & Gynaecology of Nursing Department, Faculty of Nursing, Mansoura University, Egypt.

### Subjects

All Male Maternity Nursing Group (n= 40) of the third year Bachelor of Nursing Program were enrolled and all academic and clinical teaching staff (n=10).

### Tools of Data Collection

Two tools of data collection were used:

- 1-Semi structured student questionnaire. It included twenty items related to socio-demographic characteristics, academic achievements, student preference of clinical rotation, and attitudes in clinical areas, embarrassing procedures, description of clinical training and different attitudes toward students.
- 2-Focus group interviews with students, and academic and clinical teaching staff.

### 2. Methods of data collection:

The study was conducted according to the following steps:

Official permission was obtained from the Head of the Department of Maternity and Gynecology of Nursing Department, Faculty of Nursing, Mansoura University. The tool used in the study was developed by the researchers after reviewing the relevant and related literature. Content validity of the tool was tested by a jury of seven experts in the related field and necessary modifications were done. All Male students (n= 48) were invited to participate in the study. Only students who consented for participation were recruited in the study (n= 40). Those students had already attended a fifteen-weeks maternity nursing course which is integrated into different Intended learning Outcomes including theoretical and clinical learning outcomes. At the time of the study, those students had already finished the course and had their theory and clinical exams. Ethical approval for the study was obtained from the Faculty of Nursing Research Ethics Committee. The quantitative data was collected through semi structured student questionnaires that were distributed among students. The qualitative data was collected during focus groups interview sessions. A series of four focus group interview were conducted 10 students in each

interview Also, one focus group with academic and clinical teaching staff ( n = 10) were conducted after the final exam. The focus group took place on faculty of nursing and lasted approximately 45 minutes, each discussion started with a question regarding student feelings. The interview took place with no disturbance from the researcher. However the researcher used the probing technique. All interviews were recorded. Transcription was carried out by the researcher following Jefferson (2004) and returned back to students to validate and proving it.

### Ethical approval

The agreement for participation of the subjects was taken after full explanation of the aim of the study to get subject approval for participation in the study. Also, they were assured that the information would be confidential. Only the data will be used for the research purpose.

### Statistic analysis:

The analyzing of quantitative data was conducted using SPSS version 14.0. Descriptive statistics such as numbers and frequencies were used to summaries the data. The transcripts from the focus groups interviews were independently coded and analyzed by both researches, and were read and re-read for accuracy. Qualitative content analysis techniques were then employed. The text was coded; each sentence was read and a label attached to the text. These codes were then grouped together into descriptive categories.

## 3. Results

**Table (1)** shows that the majority of students (90%) were in their twenties or over and around two-third (62.5%) of them were from rural areas. Regarding to academic achievement the majority of students had B level (65%) and 20% had C level while 12.5% had A level and no students failed in the course.

Regarding student's preference of clinical rotation areas. **Table (2)** presents that the majority of the students were preferring to take their training in lab area (65%), and (37.5%) of them were preferring the training in family planning area.

Regarding to the most embarrassing procedures from students point of views. **Table (3)** shows that perineal care was the first embarrassing procedure (62.5%) followed by breast care (32.5%), examination of episiotomy 20% while abdominal examination were last embarrassing procedure 15%. However, 25% of students reported that none of the procedures were causing embarrassment for them.

Regarding to students point of views about mothers and their attitudes toward them in clinical placement. **Table (4)** shows that most of students (67.5%) reported acceptance with restriction from mothers toward them, and only 5% of them were been refused by mothers while the rest of students (27.5%) reported acceptance attitude from mothers. However,

the table also presenting that 57.5% of students reported positive attitude regarding their training, while 35% were uncomfortable and only 7.5% of students escaped from the clinical placement.

**Table (5)** highlights students description of the maternity curriculum ,more than half of the students 55% described the maternity course as interesting, while 22.5% described it as very embarrassing and it was boring for (7.5%) of students.

**Table (6)** presents data related students opinions regarding attitude of academic and hospital staff. The data highlights that more than half of the students (57.5%) and (42%) reported accepted attitude from both academic and hospital staff respectively. While (27.5%) of students reported restricted attitude from both academic and hospital staff. Also, 5% and 10% of students reported that academic staff were either communicated only with girls or ignored them respectively. In addition to 10% and 20% of students reported the same attitude from hospital staff.

### Results of qualitative data

Five themes emerged from the data

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|---|
| 1- Students feeling during the course.                          |
| 2- Experience of rejection.                                     |
| 3- Student's suggestions for improvement.                       |
| 4- Academic staff point of views regarding student experiences. |
| 5- Academic staff suggestion for improvement                    |

#### 1- Students feeling during the course

Data presents different feelings ranging from happiness to the feeling of escape from the clinical area.

##### The positive feeling reported as:

"I am happy of gaining lots of new skills"(S1,6,7,9,10,13,17,20,31)  
 "watching birth process is amazing"(S2,8,14,15,22,24,28,33,34,37)  
 " I felt highly emotion crying while watching the birth of the baby"( S3.29,38,40)

##### The negative feeling reported as:

"It was embarrassing " (S4, 16, 18, 19, 20)  
 " I was afraid to discuss problems with mother" (S39, 34, 32, 4)  
 " I was shaking while dealing with mother " (S5, 11, 12, 21)  
 " I felt anxious and afraid to ask question" (S19, 23, 25)  
 " I always want to escape from the clinical placement" (S39, 36, 11, 20)

#### Many male students experienced rejection from health care provider

" Sometimes doctors were refusing to let us into the examination room" (S19, 35, 12, 20)  
 "You stay outside " nurse said" (S38, 34, 13, 24)  
 "Most of hospitals, keep men out of ob/gyn and women's wards" (S1, 31, 11, 22)

" I remember going to a rotation in labour suit. The head nurse made it difficult for us to enter in labour and delivery, because we were male. She said, 'You are not a medical doctor, you cannot go into labour and delivery.' But I went to another hospital, I went to the doctor directly and said, 'I need to attend the delivery....The doctor agreed, we went to delivery and we attended CS as well'" (S3, 6, 11,15,11,17, 20).

" Some physician admitted that they didn't like men in maternity nursing but it will be better if we were working in Urology, orthopaedic and emergency wards"(S1, 5, 12,16,18,17, 29, 35, 40).

#### Experience of rejection from mothers

"When introducing myself to the mother she refuse to talk to me and the nurse sent me outside " (S2).

"I experienced and witnessed discrimination against male nurse's students throughout the course and during the placemen"(S15, 1 6, 18, 19, 23).

"Some women refused male nurses, there were no support from female nurses," said"(7, 9, 20)

#### Experience of rejection from academic staff

"Our staff didn't like the lack of assertiveness and displains they were always comparing us with girls, they always saying, female students are better than male students" (23, 25, 28, 12, 6, 38)

"I hated the feeling of "others"....let us hear from the boys....what about boys"(14, 27)

#### Suggestions for improvement from students point of views.

Maternity nurse is a female job...no need to study maternity nursing"

"We should study urology or andrology"

"By time they will used to us in maternity ward"

"It should be no discrimination we all students with names"

"If we should study maternity course. It should be theory only"

"Hiring male faculty staff would be helpful"

#### The experience from academic staff point of views.

Students faced many stressors during the course from doctor, nurses and mothers

"Some of them were embarrassed from entering delivery"(1, 3, 7).

"Rejection of some women for male student nurses to enter with them in examination, labour and delivery"(4, 5, 8, 10).

"They were not active as girls"(1, 3, 7, 9).

"Some girls were not happy to join male students in group"(2, 4, 6, 10).

"Isolation from girls"(3, 7)

#### Suggestions for improvement from academic staff point of views.

Academic staff is responsible persons for education and training of students

"Using video in clinical lab for teaching labour and delivery"

"Using case study and role playing, and lab demonstration in teaching the embarrassed procedure such as breast care, perineal care and abdominal examination" "

"It's better for them to be trained on Urology and orthopaedic"

#### 4. Discussion

The image of a nurse as a smiling woman wearing a white scrub and a flat shoes plays the most prominent image for the nurse in Egypt. The data from students point of views confirmed that nursing education and especially maternity nursing is a highly gender differentiated, and appears to influence men's roles and the culture of nursing education in general. The study results adds weight to verify **Miers' (2000, 2002)** assertions that attention needs to be paid to gender nursing education and in clinical placement.

This is why our study aimed to explore the experience of newly enrolled Egyptian male nursing students into Maternity Nursing curriculum and factors that might shape their experiences from different point of views. The results indicated that the academic achievement for more than 75% of students were either B or A and there were no falling among male students. This results is contradicting with the results of **Ellis et al., 2006 ,Ozdemir et al 2008** they found that male students encounter gender barriers which negatively affect their academic achievement.

**Table (1):** Number &Percent distribution of male students according to their general characteristics

General characteristics	No. N=40	%
<b>Age</b>		
-19 years	4	10
-20 years	25	62.5
-21 years	10	25
-22 years	1	2.5
<b>Residence:</b>		
-Rural	25	62.5
-Urban	15	37.5
<b>Graduate</b>		
-Secondary School	39	97.5
-Secondary Nursing school	1	2.5
<b>Marital condition</b>		
-No married	40	100
<b>Academic achievement</b>		
A (> 85%)	5	12.5%
B (75% < 85%)	26	65%
C (65% < 75%)	8	20%
D (60% < 65%)	1	2.5%
F < 60%	0	0

**Table (2):** Number and Percent distribution of male students regarding to favourite clinical rotations

Items	No	%
<b>Favourite Clinical Rotation</b>		
Ante Natal area	0	0%
High Risk area	3	7.5%
Family planning area	15	37.5%
Lab. Area	26	65%
Post Natal area	2	5%
Labour and delivery area.	2	5%
Gynaecological area.	6	15%

There were chances for choosing more than one area of clinical rotation.

**Table (3):** Number &Percent distribution of the most embarrassing procedures from student's point of views

Procedure	No	%
▪ Abdominal examination.	6	15%
▪ Breast examination	13	32.5%
▪ Examination of episiotomy.	8	20%
▪ Perineal care.	25	62.5%
▪ None	10	25%

**Table (4):** Number & Percent distribution of mothers and students attitudes in clinical placement from male student's point of views.

Items	No	%
<b>Mothers' Attitude Toward Male Student Nurses in Clinical Placement.</b>		
Accepted as normal care givers.	11	27.5%
Accepted with restriction.	27	67.5%
Refuse to receive care.	2	5%
<b>Student's Attitudes in clinical placement.</b>		
Escape	3	7.5%
Uncomfortable	14	35%
Positive attitudes	23	57.5%

**Table 5:** Number and Percent distribution of male students regarding their description of maternity Nursing Curriculum.

Items	No	%
▪ Very effective.	6	15%
▪ Interesting.	22	55%
▪ Very embarrassing for the male student nurse.	9	22.5%
▪ Boring	3	7.5%

**Table 6:** Number and percent distribution of student's opinion regarding academic and hospital staff attitudes.

Items	No	%
<b>Attitude of academic staff toward male student nurses</b>		
▪ Accepted.	23	57.5%
▪ Accepted with restriction	11	27.5%
▪ Communicate only with girls.	2	5%
▪ Ignoring	4	10%
<b>Attitude of the hospital staff nurse toward male student nurses</b>		
▪ Accepted.	17	42.5%
▪ Accepted with restriction.	11	27.5%
▪ Communicate only with girls	4	10%
▪ Ignoring	8	20%

The most embarrassing procedures from student's point of views were perineal care, breast care and abdominal examination (62.5%, 33.5%, and 15% respectively). These findings supported by **Eswia & EL-sayed, (2011)** they reported that students were embarrassed when observing mothers' breastfeeding their babies, and observing vaginal examination.

Results from quantitative and qualitative data also, highlighted different types of gender barriers affected male students learning experiences such as mother's attitude toward male nursing students. The data presents that 67.5 of students reported mother's restricted attitude while 5% of them reported that mothers refused to receive care from them. Worldwide, these results may be explained by the culture issues of restriction of male nurses in obstetrics and gynecology department as women's husbands and partners would be uncomfortable with them having a male nursing students. (**Morin et al., 1999, Esawi & El-sayid , 2011**). In addition to many references were supporting that women did not trust male students, or preferring care offered by them. Also, women may experience stress when male nurses physically or intimately touching them. (**Nicum & Karoo, 1998, Inoue et al., 2006, Wang et al., 2010, Christiana & Charis, 2011**).

Regarding to students attitudes in clinical placements, some students reported escaping from the clinical placement in addition to 35% of them felt uncomfortable. Also, data from qualitative data is presenting negative feeling such as embarrassment, afraid, anxiety and escaping from clinical rotation. Furthermore results from our study are in agreement with **Bartfay (2010)** who presented that many students in his study felt uncomfortable during placement.

Again, the study explored different types of gender barriers affecting male student nurses learning

experiences such as academic and hospital staff attitudes. Data explored that 27.5% of academic staff and hospital staff nurses had restricted attitude toward male nurse students, in addition to 15% and 30% of academic and nursing staff respectively ignored male students and communicate only with girls. Also results from qualitative data are highlighted rejection experiences among students such as doctor refuse to let students into the examining room and keeping male students outside. Faculty staff always saying that female students are better than male students. This attitude is also noticed by (**Okrainec, 1986, Bernard Hode Group, 2006, O'lynn, 2007**) that male students have indicated that nurse faculty and staff nurses are likely to be negative toward their presence and midwifery staffs were cold and hostile during their placement.

Many male nursing students have reported gender discrimination during the course especially in the absence of nursing faculty and role models within the profession (**Anthony, 2004, Ellis et al., 2006; Meadus and Twomey, 2007; Stott, 2007**). Also this finding was supported by **Eswi & El-sayed (2011)** who said that Egyptian male student's nurse's societal image of nursing as profession is considered one of the major reasons that put the male students under stress and lead to the sense of inferiority and embarrassment.

Student's psychological experience ranged from positive to negative feeling behaviour. Among of positive feelings, feelings like gaining lot of skills, watching birth process while there were other experiences of negative feelings as a afraid to discuss problems with mothers, shaking of asking questions and want to escape from clinical rotation. These finding supported by **Eswi & El-sayed (2011)**. This was evidence in the study. Students experienced stress during course from the rejection of some doctors, nurses and mothers as some time doctors were refusing to let them into examination room and nurse asked them to stay outside.

Regarding to suggestions for improvement of the clinical training from academic staff point of view, most staff reported to use video lab in teaching labour and delivery, use case study and role playing and lab demonstration, and sharing male and female students in caring for mother.

## Conclusion

The results offer valuable information for nursing education and health care system. From students point of views. Men are minority in nursing, gender discrimination is prevalent within nursing profession Newly enrolled Egyptian maternity nursing male student were facing many stress during their study from the rejection of some doctors, nurses and

mothers. It is still not widely socially acceptable for men to enter the nursing profession in Egypt.

### Recommendation

There is critical need for male nursing students in Egypt and their availability in nursing profession is a must in the health care system. Effort should be made to give male nursing students quality of learning opportunities equal to the opportunities given to female students. Supportive system including regulations, faculty preparation should be encouraged in the faculty of nursing to provide support to male students. Social and community awareness should be raised to encourage enrolling male into nursing education and to health care system in Egypt. Updating educational nursing programs and to provide equal learning opportunities without gender bias. Career development should be offered to health care providers to accept male nurses in health care system.

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