Nursing profession in the light of Social Perception in the Middle East

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ABSTRACT

Nursing is a noble profession and worldwide healthcare systems are giving it as important as the backbone of the healthcare systems. While social perception refers to the own identity of professional transmission. In the special context of the nursing profession, the historical perspective signified social stigmatization instead of giving it noble status. Thus, this bibliography-based literature review was conducted to highlight the social perception of the ways of expression through social stigmatization. This bibliographic review was conducted by focusing literature on different databases such as WHO, PubMed, Google Scholar, and CINAHL Plus by using Bool terms and keywords. A set of 38 articles was reflected and viewed. After using inclusion criteria, articles with the last 5 years were included only with the interest and aim of the study. Findings of results revealed that social perception regarding the nursing profession holds social stereotypes and stigmatization such as an attractive model, small autonomy, weakness, faintness, unfair compensation, and other stereotypes in were found in the Middle East, especially in Saudi Arabia. It was concluded that, despite myths, stereotypes, and irrational beliefs are rooted in the general community of the Region, the profession of nursing is the backbone and only field of strong characterization with a noble identity that must be transmitted to the communities and beliefs systems of the general population in the region.

Keywords: Middle East, Nursing, Perception, Profession, Social.

INTRODUCTION

The human being is highly insightful. Through the sense organs, man connects with the external world and creates information or knowledge. In general, in interpersonal relationships or various situations of a different nature, people create

interpretations or inferences from everything they see, hear or experience. In this sense, perception is defined as an immediate knowledge, discernment, or value judgment that people make in their interaction with the environment (Turner, 2020). From the perspective of social perception, this judgment based on observation or discrimination tries to explain the conduct and behavior of others, since it integrates all the information perceived. (Kelly, 2019) It is worth mentioning that human beings are sensory entities by nature and, in the same way, social beings; given this, we visualize and analyze our environment and our interpersonal relationships. In addition, we face problems, make value judgments and act based on past experiences or memories. (Bliss, 2018)

On the one hand, Kapitza et al. (2019), regarding perception, mention that it is an "act that creates once and for all, together with the constellation of data, the meaning that links them, not only discovers the meaning that these have but also makes them have a meaning". In the context of the topic that concerns us, it means that the users and beneficiaries of our nursing care or attention would collect, in their minds, all the data referring to the experiences lived with the nurse, and, from this, they would create stereotypes, preconceptions or value judgments concerning our profession. (Feng, 2020)

Other authors such as Bryant and Barnett (2019), quoted social perception through the theory of Social Representations, "which is a specific mode of information, whose purpose and role is the amplification and modification of actions and behaviors and interaction among different human being". Through this assertion, meaning is given to things through the perception of people; however: what does society perceive of the nurse? Society will perceive what the nurse transmits with her identity. (Jaspal & Nerlich, 2020; Waldrop & Likis, 2021).

Developing

The social image as a consequence of professional identity

According to van der Cingel and Brouwer (2021), the identity of the human being is built through experiences, values, stories, and memories. From this construction, it is that the character and personality of the individual are molded, which translates into conceptions, paradigms, forms of action, and future perspectives.

Specifically, professional identity is the set of attributes that allow the individual to feel part of a professional guild. That is, feeling capable of conducting the activities inherent to their training as a nurse, exercising in a work context, and, in addition, being socially recognized as a professional (Shengxiao et al., 2021). Likewise, professional identity would be interpreted from a sociological perspective and point of discussion, as the socialization of what the professional is within structured contexts. (Waldrop & Likis, 2021).

However, professional identity depends on several factors, including the training received in the university years, labor relations, belonging to the group with which you work, the legitimacy of knowledge, the skills acquired, and -very important- satisfaction with the chosen profession. Then, it could be affirmed that the person who chose and completed a career that was not to his real liking, could suffer from identity conflicts and, therefore, his performance could deteriorate.

The history of nursing as a "restriction" in the construction of professional identity

A normal social and global perception of the modern world is there that, Saudi Arabia and other countries in the Middle East hold negative viewpoints about women's work especially when their interaction comes between females and males (Koburtay & Abuhussein, 2021). In the case of nursing, this context is not the exception, all the history that it has as a profession could stigmatize its current identity. As a recapitulation, during the domestic stage, the mother was figured as the giver of care and the female gender as the main figure in the care for the restoration of the patient's health. (Maddison, 2022). However, even today this stigma remains since society associates a doctor with a man and the nurse is a woman, who translates as the male figure represents power, strength, and dominance, while the female figure represents weakness, invisibility, and submission. This situation has tried to be

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eliminated from the social imaginary with gender equality trends but has had little success in the more traditional generations (baby boomers). (Roitenberg, 2020).

Later, the Middle Ages arrived, and the vocational stage arises, in which the care of the sick was lavished by deaconesses, virgins, midwives, and widows since it was considered that to pay for the sins committed, the sick should be cared for. Likewise, this action was associated with an extraordinarily strong component of service and vocation. Concerning the present, the nurse is seen as kind, helpful, patient, human, and an angel. (Hitzer, 2020). Therefore, his virtues are more valued than his knowledge. (Falcó-Pegueroles et al., 2021) In this sense: is there any other profession that is considered in this way? Why is the nurse considered in this way? Would this overwhelm all his other professional qualities? Such questions stigmatize us and do not allow us to grow, at least in the social imaginary.

After the Middle Ages, already in the Modern Era, Florence Nightingale emerged as a bastion for the professionalization of nursing; because it gives this profession prestige and status, because - back then - only aristocratic ladies were the ones who played this role. (Murray, 2020) In the 19th century, women were the only ones who could opt for nursing training, since it was considered natural due to motherhood, care, and compassion as feminine characteristics. Again, the stigma of gender and virtues of the profession on stage. (Dobiesz et al., 2022).

Wrong motivations in the choice of nursing as a profession, motivate the wrong construction of professional identity

Identity is an ideological context of care. It is a part of the structure of care and the result of the training and socialization of nurses, especially in Saudi Arabia which has been observed during the Covid-19 pandemic. (Noshili et al., 2022). Currently, in developing countries, nursing has become a profession that, for the common social denominator, is a fast career that generates income quickly, thanks to the good and numerous numbers of job opportunities it offers and, it is even considered by certain opinions, as "easy"; in

terms of the complexity of the study required. (Austin et al., 2020)

On occasions, the foregoing has motivated the student who enters to be from a low economic social stratum, an adolescent with another type of professional vocation, but who, on the advice of family or friends, decided to choose to nurse to aspire to a "future." Also, among other factors is the fact of having failed in other careers such as medicine, law, and accounting, among others. Well, it made the students desert their vocation and opt for another career that would provide graduation in 4 years; In addition to the fact that someone advised him and made him see the loss of time that he had, he subtracted valuable years and, therefore, he should look for a fast and yielding career. (Alharbi, McKenna & Whittall, 2019).

All the mentioned factors could be potential causes of the loss of identity or, even worse, of a false identity, as far as the nursing profession is concerned; because, if further research is done, it may also have an impact on the care that patients receive. In the current context of Saudi Arabia, we also find ourselves with the problem of the fragmentation of the profession; since there are Nursing Aides, Nursing Specialists, and -in a new project of the Higher Education Commission and Ministry of Health who is on par, with the same workload and curricular component as the Nursing graduate and postgraduate. For this reason, it is of significant importance to know the professional identity and the social perception of our role in the community, to determine, in this way, the relevance of our training in the Middle East and especially in Saudi Regions. (Alsayed et al., 2021; Noshili et al., 2022).

Identity and professional autonomy

In addition to the fact that nursing is stigmatized as a female profession, there is the assertion, so common and so repeated, that it fulfills the role of assistant, assistant, or doctor's assistant, that is, without its field of competence (Elmorshedy et al., 2020); in addition to the fact that the activities carried out are caring, delegated and dependent on the doctor (Alotaibi, & Al Anizi, 2019). Likewise, others-in a more aggressive attitude, perhaps

consider nursing for someone who does not require great intellectual aptitude or a critical spirit. In this sense, these positions contradict the decades that have passed since the creation of universities that train nursing professionals, based on the scientific method (Nursing care process) and teaching-learning processes with critical and reflective thinking. (Yaseen, 2019)

Now, autonomy is defined as the freedom to act in what is known, independence at work, and taking initiative without the need for close supervision (Yaseen, 2019). So, are we autonomous? Yes, although, legally, you depend on a medical prescription for the administration of medications, you are autonomous due to the multitude of activities that the nurse performs without being supervised because for that he was trained, knows, knows, and is skilled in the application of the process. nursing, both in theory and practice. This legitimizes the profession; however, the nurse works a lot and, unfortunately, nothing is visible. In a research article, Diogo et al. (2019) quoted a statement of Collier, in which it was mentioned that "the nurse is difficult to see when he is there and endearing in his absence".

Role conflict and professional invasion

It should be noted that there is also the wrong social perception that nursing assistants have a nursing degree and vice versa. In a study conducted in Saudi Arabia during Covid-19, in the users of a primary health care centers, when asked about what activity the nurse does, the majority of the nursing participants associated the profession with the application of injections, 60% with helping the doctor and 13% did not know. On certain occasions, in primary care health centers, the role is more confusing; since there are graduates in nursing, auxiliaries, and primary health care technicians, who, due to the lack of human resources, do everything everyone else does. Consequently, prostituting all activities and functions could lead to role confusion or, worse, professional intrusion. (Alyahya et al., 2021).

The common social denominator relates nursing to three aspects: uniform, hospital, and procedures (Al Amer, 2020). So, what would be the difference between assistants, technicians, or graduates? As mentioned in previous lines: by

legitimizing the profession, which is the empowerment of a conceptual framework based on the scientific method, the skills, and abilities of its daily task in professional practice, but the visibility of professional identity. (Alsufyani et al., 2020)

Stereotypes

Nursing is one of the most stereotyped professions. For example, the fact of observing "sexy nursing uniforms" in sex toy stores, the caricatures of nurses with tight suits, and the novels where it is observed that the doctor-nurse relationship, responds to the tasks assigned by its " boss". Within the context of modernity, the image projected of the profession has been investigated on YouTube platforms and the result has been obtained that the nurse is a sex toy or an incompetent fool, which corresponds to an offense that transgresses the profession and those who wear the nursing badge. (Elmorshedy et al., 2020; Al-Khunizi et al., 2021)

In contrast, in Middle East regions especially Saudi Arabia, the scarce knowledge of the evolution of the nursing profession has meant that most parents do not advise their children to opt for the profession, due to how sacrificed and poorly paid it is; as well as constant contact with diseases, low social consideration and lack of job promotion (Aljohani, 2020). In this sense, this assertion is true and may apply to several contexts; therefore, the importance of forming a "healthy" professional identity to project a positive social image of the profession towards the community and that it benefits from the services that nursing has. (Noshili et al., 2022) Well, if the social image is, on the contrary, negative, users do not tend to look for it. (Aldhahi, & Alshehri, 2019)

Obstacles to the visibility of the profession

In short, being able to make the profession visible to society requires the construction of a professional identity. However, what obstacles do nurses face to make themselves visible especially in typical societies like the Middle East? Well: with the lack of autonomy, the servility, the absence of union leaders, the professionals with a weak professional identity, the nurses who are

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knowledgeable in many aspects, but specialists in nothing, the little production of science, the criticism among professionals and the lack of pride in nursing (Hvidt, 2021; Alsadaan et al., 2021)

Sometimes, care is not measurable through statistics, because caring is creating links, being empathic, being professional in each activity conducted, and being communicative, among other things. Said functions are subjective type and, up to a certain point, for the common denominator, something without value. (Miwa & Watanabe, 2020). Therefore, how could we make nursing care more visible? Through teamwork, results orientation, which is: through records and evidence-based research, management, and leadership; use of social networks and the internet that make the role visible; approach to patients. (Alsadaan et al., 2021)

Perspectives on strengthening the nursing identity

Although the nursing panorama does not seem to be encouraging in the Middle East especially in Saudi Arabia in the past, due to the undervaluation that other professionals have of the contribution of our profession (Horanieh, Macdowall & Wellings, 2020), in 2018, the worldwide launch of the three-year campaign called "Nursing Now" was conducted. (WHO alliance and the International Council of Nurses) whose main objectives are to empower nursing professionals so that they have a voice in the formulation of health policies; encourage investment to increase the nursing workforce; increase leadership positions, and best practices, and empowerment of the profession. The creation of this campaign is justified by the study called "Triple Impact" where it was mentioned that the health of the population could improve if the profile of the nurse were increased, which would maximize their contribution to achieving universal health coverage. (Cassiani & Lira Neto, 2018)

The aforementioned media campaign encourages union, academic and social organizations to visualize the nurse as an active part and main axis of the health team. So, is the campaign relevant in the context of Saudi Arabia especially and in the Middle East generally? Of course, it did, it came at a suitable time; since the discrimination that the profession has suffered by not being considered in leadership positions, sometimes due to gender, are archaic situations that, in the 21st century, frankly, represent a tremendous absurdity. (Al-Dossary, 2018).

CONCLUSIONS

A poor professional identity leads the nurse to not make their care visible and, as a consequence, to a deteriorated social image. In this line, the stigmas of the past, which persist in the present, affect the image of the nurse in society, not only in the community but also in the eyes of their colleagues, co-workers, and even their families. Therefore, enhancing the social image of nursing by strengthening the professional's self-image is the watchword, and this will be achieved by increasing identity and leadership.

What if we are prepared? What if we will make it? Yes, we are, we always have been, but sometimes the nurse is so absorbed in his day-to-day and so committed to his work that he forgets the main thing: himself. However, it is time to wake up, it is time to demonstrate what nursing is and take the leap that is needed to be visible and manage substantial changes for the benefit of the small and large scales of communities.

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