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Review

Demonstration of caring by males in clinical practice: A literature review

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ARTICLE INFO

Article history:

Received 1 September 2015

Accepted 21 July 2016

Available online 29 July 2016

Keywords:

Nurse

Male

Caring

Clinical practice

Touch

Review

ABSTRACT

Gender stereotyping on the role of male nurses in the use of intimate care, especially the application of touch, was explored. The barriers for men to provide care were determined. Strategies adopted by male nurses to overcome these barriers were discussed. The review of literature showed that role stereotyping is still prevalent within nursing. Public media should recognize the diversity of caring and apply positive materials to shape a new image of nursing. The nursing faculty should develop an atmosphere of acceptance and empower male nursing students in the nursing school and clinic. Male nurses themselves should deeply believe that nursing is a profession suitable for both genders.

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Peer review under responsibility of Chinese Nursing Association.

<http://dx.doi.org/10.1016/j.ijnss.2016.07.006>2352-0132/Copyright © 2016, Chinese Nursing Association. Production and hosting by Elsevier B.V. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

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1. Introduction

Caring, nursing, and female gender role are strongly synonymous. Women dominate professions involving care. A total of 44,938 males nurses have been registered in China in 2012, accounting for approximately 1.8% of all registered nurses (RNs) [1]. This finding is not unique to China. These statistics support the prevailing notion that male gender role and caring are “mutually exclusive.” Despite this association, the number of men engaged in the nursing profession has been increasing worldwide. This phenomenon challenges the stereotype that men are incapable of providing intimate and sensitive care to women clients [2]. Reports have suggested that the desire to care for others and provide a meaningful contribution to society are the primary reasons why men chose nursing as a career [3]. Nursing has been strongly associated with caring, which is strongly associated with nursing practice. Several studies have attempted to understand and explain the provision of care by male nurses, but the process by which male nurses care for or care about others, especially the provision of intimate care to women clients, is rarely examined. Therefore, this article will summarize briefly the association between male nurses and caring.

2. Caring from the male perspective

2.1. Definition of caring

Caring is a complex phenomenon. Centrality nursing has focused on the concept of caring, but the exact definition and measurement of care needs further elucidation. Thus, caring is very difficult to express.

Nursing is a health profession described as an art as well as a science [4]. Watson concluded that caring consists of “knowledge, thought values, philosophy, commitment, and action, with some degree of passion ... that strive to maintain the dignity or integrity of clients” [5]. Nurse caring has been described as an “interactive process that usually occurs during moments of shared vulnerability between nurse and patient” [6]. Leininger [7] also stated that caring is the essence of nursing as a way to improve human health conditions. Caring has been described from five perspectives, namely, as a human trait, interpersonal interaction, moral imperative, therapeutic intervention, and an effect [8]. The principle of caring has been primarily explored from a feminine perspective because the majority of researchers and theorists who have discussed this concept caring are women. Thus, Colby [9] conducted a descriptive naturalistic inquiry with practicing

male RNs. The participants were asked to address the enigma of the essence of nursing. The findings implied that gender may be irrelevant in terms of caring. Male and female can equally provide care as competent and effective nurses.

2.2. Traditional gender perspectives of caring

Caring has been historically and persistently associated with women and femininity, which is reinforced by the continued low number of men in nursing [10]. Men, with the drive to feed the family, have been traditionally assumed to lack the competency to care for or care about others. This concept was particularly strengthened by feminists, such as Gilligan and Chodorow, who associated caring with womanhood, not to manhood [11]. Male nurses often consider the learning process of caring as awkward, although these men were primarily motivated to enter nursing because of their desire to care for others. A study on male nurses has suggested that the number of nurses who resigned from the profession was approximately four times as frequent as female nurses, especially during the first four years after graduation [12]. This trend may have been caused by the fact that male nurses find it difficult to work in a profession dominated by women [13]. Moreover, social stigma renders the male nurses in a vulnerable situation when providing intimate care to women clients [14].

2.3. Differences in expression of caring

Numerous theories have shown that caring is the core value in practical nursing. The essential components and influences of caring have been extensively studied. Nurse caring is considerably affected by ethics, socialization processes, cultural norms, and philosophical beliefs [15]. These variables have been closely associated with gender, which may influence caring perceptions and behavior. Differences in caring by gender have been reported. Several reports have included experienced male nurses in examining gender differences in nursing care. Paterson et al. [16] conducted a qualitative study to describe the experience of male student nurses as they learned to care as nurses. The respondents viewed caring by male students as more restrained than caring provided by female students. Similarly, Evans [13] investigated the actual experience of male nurses to describe the differences in caring traits between male and female. The results show that male nurses applied more humor into clinical communication to build mutual trust in the nurse–patient relationship. By contrast, women used more touch with male and female clients. Male participants claimed that their caring is as valuable as that of care provided by females, despite the difference in their expression [16]. Watson and Lea [17] conducted a test of

the psychometric properties of a tool called the Caring Dimensions Inventory with 1430 respondents, 11% of whom were male. Respondents were asked to choose the actions that represented caring. The results show that men were obviously more likely to associate psychosocial tasks with caring than women. Whether these male nurses were more likely to implement psychosocial tasks at work than females remains ambiguous.

2.4. Barriers to providing caring

Caring for and about others have been considered a “naturally female” activity throughout modern history. An increasing number of men have chosen to enter the nursing profession and became more aware of the importance of demonstrating care to others. However, men still face challenges in fully displaying a caregiver role. Williams [18] who conducted in-depth interviews with 49 female marines and 26 nurses (21 male) reported that male nurses continued to attempt to disassociate themselves from females and stigma being in a female-dominated occupation. Therefore, men generally prefer night shifts because this practice makes them more independent in their work with less medical supervision and fewer arguments with families or female colleagues [19]. Moreover, male nurses tend to specialize with higher prestige, technology, or autonomy, such as acute care, psychiatry, and operating room. Male nurses have avoided pediatrics or gynecology. Several males have emphasized that they demonstrate caring with the same depth and value as females, but deliver caring differently. Whether the actions of these men differ from those of women remain unclear. Specific difference in the expression of caring by both genders was rarely explored. All nurses welcome a gender mix in a unit considering the advantages of diversity in perspectives. Otherwise, men are likely to be more confident and able to formulate decisions than females, focusing on instrumental rather than emotional tasks.

3. Male nurses and the use of intimate touch

3.1. Problematic nature of male nurses' touch

Touch is a key and demonstrative element of nursing. This practice has numerous significant purposes and meanings within the patient–nurse relationship. However, touch is a behavior that is specifically constructed by gender and social rules [13]. Violations of these roles have placed men in a defensive situation and led to the belief that masculine touch is a vehicle for sexual abuse. Gender stereotypes exist in nursing. Specifically, men are viewed as distant from caring and nurturing because touching and feeling are considered more natural to women. Women are considered to be able to intimately touch clients, but such practice remains a great challenge for men. Nurses must employ actions that meet the affective needs of clients, regardless of whether men adopt maternal style in providing care. However, the way by which men should apply touch clinically should be elucidated.

Surprisingly, a low-touch trend has been prevailing in the current highly technical society despite the importance of

touch to clinical nursing. The process, timing, or context in which the type of touch should be employed in contemporary nursing should be described. The insufficient information on touch may be responsible for the inadequate measure in nursing education to address the issue of men's provision of intimate physical care. Inoue et al. [20] argued that men are marginalized during their education because the faculty has focused on female stereotypes and roles such that male nurses should behave like women to be proficient nurses. Peterson et al. [16] showed that male students “reported feeling of confusion, resentment, and fear when they first attempted to emulate touching that they had been taught by ‘female caring style.’” These students reported dismay with their faculty for not discussing touch and not understanding what these male students were going through as they negotiated the instructions they received to provide care with touch.

3.2. Strategies to protect oneself from accusations when applying touch

Touch is a behavior that is a primary expression of care in nursing practice. This behavior is also required to complete various tasks. However, men sometimes face difficulty in providing care that requires physical closeness because of the social stereotypes. Men's touch is open to misinterpretations that leave them in vulnerable situations. Male nurses use strategies to protect themselves when taking care of patients, especially female patients. Harding et al. [21] interviewed 18 male nurses regarding their experiences in using intimate physical touch in clinical nursing. Male nurses often put on some gloves to ensure the absence of skin-to-skin contact when using intimate touch. O'lynn [22] also conducted a survey with 111 male nurses and showed that 49% of the male nurses from four different nursing schools reported receiving no guidance on the appropriate use of touch from their instructors. Therefore, O'lynn [23] described guidelines for the use of touch based on anecdotal evidence including the use of communication, awareness of cultural differences and beliefs, and use of confident touch. These guidelines facilitated the provision for patient privacy during nursing procedures and touching less sensitive areas prior to touching more sensitive areas.

This lack of instruction is unfavorable for all nurses, especially for males, because male gender roles in Chinese society severely limit the use of touch. Guidance expressed in terms of “do not do this” or “do not touch here” may aggravate the self-consciousness of male nurses to touch. Therefore, studies to formulate an effective instruction to guide men on the appropriate use of touch are necessary.

4. Discussion

The increasing number of male nurses presents numerous implications for nursing practice and nursing profession. Nursing seeks to recruit and maintain a more diverse workforce, and the clients may benefit from diverse styles and perspectives. However, expression of compassion and sympathy are considered female “privileges.” Thus, nursing has been defined as feminine expression of caring. The American

Assembly for Men in Nursing (AAMN) and other nursing groups conducted a survey in 2005 to explain the dearth of men engaged in nursing career. A total of 498 male nurses responded, and the results show that 73% referred to negative role stereotypes, 50% identified nursing as a female “gendered” occupation, and 42% stated lack of male models and nursing faculty. Previous studies reported that the male students’ perceived the following factors as obstacles in their profession: absence of guidance by the faculty for the appropriate use of intimate care; insufficient male nursing faculty; educators refer to nurses as “she”; and no history of men in nursing [24]. In addition, the lack of awareness by the nursing faculty of the individual needs of male students and absence of gender neutrality in nursing textbooks were also mentioned in the literature [25]. Stott [26] conducted a qualitative study with eight male nursing students in Australia. The result revealed that male nursing students were treated differently from educators in clinical fields and were not educationally prepared to provide intimate care to women. Caring can be taught and learned by observing or experiencing caring incidents. Thus, the fact that nurses care for or care about others should not be ignored because these nurses would occupy the nursing profession, particularly male nurses. The importance of caring is currently emphasized in China. However, the theory, knowledge, attitudes, skills, and standard of caring are rarely discussed in nursing education. Ma et al. [27] conducted a qualitative study in China and identified that role model, conducive learning environment, directive substantive way of learning, and cultural competency are related with the baccalaureate nursing students’ perspectives on learning to care.

5. Implications

Men can be accommodated in nursing. Proactive recruitment materials appealing to men should be developed. Thus, several recommendations can be derived from previous studies.

5.1. Implications in nursing education

The curriculum in nursing care in China is uncommon, and the implementation of strategies to improve caring competency is deficient. The absence of direct guidance of learning to provide care indicates that the formal curriculum needs further development. Nursing students and new nurses, especially male nurses, should be presented guidelines and instructed on the use of intimate care, such as touch, in nursing. Care role models are important for learning, such that nursing faculty and preceptors should act as role models for visible care images. These entities contribute to the learning on caring. Hence, caring educators should be keenly aware of uncaring incidents and be alerted to the consequences of such negative experiences.

5.2. Implications in role stereotype

Men entering the nursing profession risk being labeled and stereotyped because of the extensive gender bias and role stereotyping. Nursing school curricula can incorporate the

history of men in nursing and highlight contributions of males to nursing. Nurse faculty and clinicians should advocate gender diversity by educating the public about nursing. Individuals can solicit support from social-wide recognition and team members. Social support environment and positive staff relationship can enhance the social position of nursing to attract more men to the nursing profession.

5.3. Implications in public media

Professional publications should lead by example through neutral language and include photographs of male nurses caring for women in labor and delivery. Terminologies in nursing publications and textbooks should be examined and edited to be gender neutral. The role stereotype and traditional nurse image should be identified and abandoned. Outstanding male nurses should be positively reported and recommended to be role models. Reducing the emphasis of femininity often associated with nursing will be beneficial to improve the perception of society of men in nursing.

6. Conclusion

The importance of caring in nursing is evident although its concept remains elusive. Modern nurse scholars have paid little attention to gender differences in caring and touch. Men are currently joining the nursing profession in record numbers. Nursing still sends a message to men that male nurses should care for or care about clients as women do to be qualified nurses. Therefore, the concept of society that “nursing and caring are considered to be a female ‘privilege’” should change, and the diversity of caring should be accepted. The nursing faculty should abolish old assumptions and provide equal opportunities to nursing students regardless of gender. The faculty should create a climate of acceptance for student’s difference and empower male nurses in providing intimate touch for female clients. These practices will reshape the new image of nurses. The diversity offered by caring men in nursing should be embraced. Caring is not only the work of women. Caring is the work of nurses.

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