
PERSONALITY CHARACTERISTICS OF MALE NURSING STUDENTS

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ABSTRACT

The aim of the present study was to elucidate the personality traits of male nursing students in comparison to female nursing students and non-nursing male health-care students. A total of two hundred and forty participants consisting of eighty female nursing students, eighty male nursing students and eighty non-nursing students of medicine from three educational institutes of Karachi were recruited through convenient sampling. The short form of Bem Sex Role Inventory (BSRI) and a self-developed demographic questionnaire were used to evaluate the personality characteristics of the participants. T-test revealed a significant difference between male nursing students' mean and medical students' mean on the personality traits of femininity and masculinity. Moreover, male and female nursing students had similar scores on the trait of femininity. In the case of demographics, majority of the male nurses belonged to the Pathan community, lived in joint family systems, were single and had strong emotional attachment with their mothers.

KEYWORDS

Nurses, Masculinity, Femininity, Bem Sex Role Inventory

INTRODUCTION

The proponents of biological model emphasize the role of genetics in the occurrence

of gender differences (Fuller, Zarrow, Anderson, & Denenberg, 1970), while social scientists attribute these disparities to environmental influences (Bussey, & Bandura, 1999). However, a combined approach accommodating both the paradigms suggests that the cognitive and behavioral differences existing among men and women are embedded in the complex interaction between nature and nurture (Cleveland, Udry, & Chantala, 2001; Hofstede, Dignum, Prada, Student, & Vanh e, 2015).

Gender roles, also known as sex roles, refer to predetermined societal standards for acceptable behaviors to be exhibited by men and women (Blackstone, 2003; Monto 1993), whereas sex-role orientation refers to the extent to which individuals identify with these roles. (Bem 1981a). In general, instrumental attributes such as independence, dominance and aggression are associated with the male gender, whereas qualities embodying expressivity such as nurturance, gentleness, and compassion are attributed to women (Bem 1981a). Two schools of thought accentuate the role of socialization in the acquisition of sex-role orientation. On one hand, the social learning perspective offers explanation for the acquired set of behaviors from the same sex models in the environment through the learning process primarily by imitation and modeling. (Bussey, & Bandura, 1999). On the other hand, social cognitive theorists (e.g. Bem, 1981b) emphasize the importance of assimilation and accommodation of gender related information in explicating the development of gender schema, and identification with traditional gender roles.

Specific gender roles encompass all spheres of a person's life including one's career preference. In a study, Millward, Houston, Brown and Barrett (2006) presented male and female students in the United Kingdom with a task that required sorting cards according to their preferred lines of work from 54 career options. Moreover, the participants were evaluated on the extent to which they conformed to gender roles. The results of the study revealed that students were more likely to show preference towards particular careers which were congruent with their sex-role orientation.

The perception of youth regarding different occupations influences their decision to choose a profession. It has been found that men usually opt for specific professions in the fields of mathematics, architecture, engineering, science and technology (Ceci, & Williams, 2007; Flabbi, 2012) as they are believed to perform better in these fields compared to women (Reuben, Sapienza, & Zingales, 2014). Moreover, men are more likely to occupy government posts and managerial positions (Anker, 1998) owing to the leadership qualities associated with their gender (Hoyt, 2010). Women, on the other hand, generally select fields related to healthcare, education, and humanities (Flabbi, 2012), and are more likely to become beauticians, social workers, teachers and nurses compared to men (Anker, 1998; Mutekwe, Modiba, & Maphosa, 2011; Statistics New Zealand, 2015). The reason for these vocational choices by the female members of the

society is the association of these professions with feminine traits (Mutekwe, Modiba, & Maphosa, 2011)

The nursing profession in particular, has historically witnessed significant engagement of both men and women without any discrimination (Mackintosh, 1997). However, the noteworthy contributions of a famous nurse Florence Nightingale led to the widely accepted view that nursing is a job well suited for women. Moreover, she propagated the belief that nursing is congruent to a woman's natural role as it requires the services of individuals who are caring, compassionate, and selfless and as a result, men were excluded from this profession. (Meadus, 2000; Ross, 2017). The image further ostracized men from the nursing profession since they are believed to be controlling and aggressive, and therefore considered unfit for this job (Evans, 1997). Media portrayal of men in nursing also contributed in strengthening the gender based stereotypes regarding them. For instance, many popular Television programs show male nurses to be feminine or weak (Weaver, Furgeson, Wilbourn, & Salamonson, 2014). These stereotypes may contribute to a negative public perception regarding men who select the nursing profession. In a research conducted among Canadian students, it was found that non-nursing and nursing students agree that there is a widely accepted notion in the society that nursing is a woman's job. The students in this study also agreed that men who choose this line of work are shown to have effete personalities in the media which negatively influences their decision to choose the nursing profession (Bartfay, Bartfay, & Clow, & Wu, 2010). Thus, the meagre influx of men in this profession could be attributed to the stigma that surrounds men who join nursing.

According to statistical data from different parts of the world including the United States of America, Australia, and Canada, women greatly outnumber men in the field of nursing. (U.S. Census Bureau, 2013; Australian Institute of Health & Welfare, 2012; Canadian Institute for Health Information, 2012). Uneven gender distribution in this line of work is also seen in Pakistan, where male nurses are greatly outnumbered by their female counterparts. This can be seen in an average class room of Bachelor of Sciences in Nursing (BSN), where the male to female ratio is 10:90 (Chauhan, 2014). Similarly, the Pakistan Nursing Council (2016) issued a list of recognized institutions offering degree programs in Nursing across Pakistan. This list of 59 approved institutes indicates that all the co-education institutes have an unequal quota in BSN degree for male and female students, with the quota being significantly higher for female students. According to the record of Sindh Nurses' Examination Board Karachi (R. John, personal communication, March 10, 2010) male nursing trainings started in the year 1973 and less than a hundred students had completed General Nursing Diploma program from 1973 to 1978. This number decreased approximately by one half from the year 1979 to 1981 and the number continued to decline between 1982 and 1984. However, significant increase in the number of male diploma holders was seen in the

next four years with the numbers amounting close to the total of students who received their diplomas from 1973 till 1984. Moreover, a greater rise was recorded in general nursing from 1989 to 1992, with greater number of graduates in the following years. Between year 2000 and 2003, the strength of the graduating batch totaled to above five hundred male students. The following four years witnessed a considerable decline in the number of male diploma holders. However, a sudden increase was reported in the graduating batch of the year 2008 which approximated to the highest number of graduates compared to any given time period since 1973.

The rise in the number of males entering the nursing profession is also reflected through statistical data from other countries. For example, according to American Community Survey Highlight report by the US census Bureau (2013), following the decline in the number of male nurses in the early 19th century, there was an increase in their number in the 1970s, and from then onwards till 2011, the number of registered male nurses has increased from 2.7 to 9.6 percent, and the number of licensed practical and licensed vocational nurses has increased from 3.9 to 8.1 percent. In a similar fashion, the overall number of male nurses and midwives in Australia increased from 9.6 in 2007 to 9.9 percent in 2011, and the number of registered nurses increased from 9.6 to 10.2 percent in the same time frame (Australian Institute of Health & Welfare, 2012).

The reentry of men in nursing, in spite of the popular opinion that it is a field well suited for women, can be explained due to advantages men receive in profession due to their minority status. Simpson (2004) conducted an interview with 40 men working in female dominated professions as librarians, nurses, cabin crew, and elementary school teachers. The findings of this study suggest that men enjoy special privileges and promotions to top ranks. Similar findings have been reported by other studies according to which men in non-conventional occupations have better opportunities to thrive in their fields because of the “*Glass Escalator Effect*” (William, 1992). Zysberg & Berry (2005) shed light on reasons for this career selection with reference to Maslow’s hierarchy of needs. The findings of their study indicate that in contrast to women, men are more likely to enter nursing to fulfill survival needs such as financial requirements and job security.

While some studies attributed the cause of male incursion in nursing to the privileges they enjoy, some assessed their personalities to explore plausible reasons. Studies conducted on men in the nursing profession using Bem’s sex role inventory (BSRI) indicated that majority of the male nurses identify with female gender roles more than they identify with male gender roles (Loughrey, 2008; Fisher, 1999). However, results of some researchers suggest that men who take on the nursing career are more masculine compared to their female counterparts (McCutcheon, 1996). In fact, it has

been found that they overemphasize their masculine traits to compensate for the stereotypical effeminate image associated with this occupation (McCutcheon, 1996; Simpson, 2004).

Keeping the existing literature in mind, the current study was designed with the objective to elucidate the personality traits of male nursing students in comparison with their female counterparts and male medical students. Primarily, it was intended to evaluate if the personality of men in nursing had a link with their choice of career. In addition to evaluating personalities of male nursing undergraduates, the present study aimed at inquiring reasons from them for selecting this line of work despite the stigma attached to it.

RESEARCH OBJECTIVE

1. To evaluate whether the male participants in the nursing sample have more feminine, but less masculine traits than male medical students.
2. To evaluate whether male nursing students obtain scores on the femininity scale similar to those of female nursing students

RESEARCH HYPOTHESES

1. Male participants in the nursing sample would have more feminine, but less masculine traits than male medical students.
2. Male nursing students would obtain scores on the femininity scale similar to those of female nursing students

RESEARCH METHODOLOGY

Sample

Two hundred and forty participants with ages ranging between 18-23 years ($M=20.22$, $SD=1.421$) were recruited through convenient sampling method from two nursing institutes (one public and one private) and one public medical institution. Eighty male nursing students and 80 female nursing students were recruited from Institute of Nursing, Dow Medical University and Jinnah College of Nursing. Moreover, 80 medical students enrolled in MBBS program in Sindh Medical University were the male non-nursing participants of this research.

Inclusion criteria: The study sample recruited participants from 1st and 2nd years of their respective baccalaureate programs with ages ranging between 18-23 years. .

Exclusion criteria: Participants enrolled in Post-graduation programs in their respective fields (i.e. Nursing & Medicine), and those with ages above 23 years were excluded from the present study. Additionally, students who refused to give consent, as well as those suffering from gender identity disorder were excluded from this

research study.

Instruments

Bem Sex Role Inventory (short form): The short form of the Bem Sex Role Inventory (Bem, 1981a) used in the study is a self-report instrument consisting of 30 items. In particular, ten items assess stereotypical masculine traits, ten items measure stereotypical feminine traits, whereas the remaining ten items are gender-neutral items. Participants completing the BSRI simply rate themselves on a 7-point scale ranging from *never or almost never true (1 point)* to *always or almost always true (7 point)*. The BSRI short form yields three scores: A masculinity score, a femininity score, and an androgyny score. The masculinity and femininity scores are calculated by summing up all the scores on the corresponding items and dividing the sum by 10 to obtain the average rating on these items. The average score on each of these scales may range from 1.0 to 7.0. Androgyny score (ranging from - 6 to + 6) can be obtained by subtracting the masculinity score from the femininity score. BSRI (60-item measure) is a widely used measure for sex-role orientation. It has good internal consistency ($\alpha = 0.82-0.86$) for femininity and masculinity scores, and test-retest reliability ranging from 0.9 - 0.93. The short version of BSRI has plausible correlation of 0.90 with the BSRI 60-item inventory (Holt, & Ellis, 1998).

A self- developed demographic questionnaire: This questionnaire was prepared after exploring relevant literature. It comprised of 16 questions exploring age, ethnicity, emotional attachment, etc.

Procedure

Permission to conduct the study was taken from the Ethical Review Committee; Liaquat University of Medical and Health Sciences (LUMHS). The respective heads of institutes were then approached for permission to collect data. The prospective students were briefed about the purpose of the research. It was further explained to them that their participation was voluntary (i.e. there was no compulsion to participate). The students who agreed to participate gave their written consent. After this, the short form of Bem Sex Role Inventory (BSRI) and demographic questionnaire were administered individually to each participant. The students had the choice to report or not to report their names on data forms. This was primarily done to protect their confidentiality. They were required to fill the questionnaire and return it by hand. They had permission to inquire about the inventory/ questions they found confusing or did not understand. Once they had completed the forms, they were thanked for their participation and were provided with an email address to enquire about the study's results.

RESULTS

Data was analyzed by SPSS (version 16.00). Two hundred and forty students (80 medical students, 80 male nursing students and 80 female nursing students) were recruited to complete the short-form of the BSRI and the demographic questionnaire. Tables 1, 2, & 3 shows the demographic details of male nursing students, medical students and female nursing students respectively. Their ages ranged between 18 to 23 years ($M=20.22$, $SD=1.421$).

Table 1: Demographic Characteristic of Male Nursing Students (N=80)

Variables	Frequency (f)	Percentage (%)
Ethnicity		
Sindhi	7	8.8
Urdu Speaking	10	12.5
Panjabi	10	12.5
Pathan	50	62.5
Others	3	3.8
Birth Order		
First	23	28.8
Second	16	20.0
Third	9	11.2
Above than third	31	38.5
Emotional attachment with:		
Father	11	13.8
Mother	47	58.8
Brother	2	2.5
Sister	4	5.0
Friend & Other	16	20.0
Marital Status		
Single	77	96.2
Divorced	2	2.5
Married	1	1.2
Socio economic background		
Lower	4	5.0
Middle	71	88.8
Upper	5	6.2
Family type:		
Nuclear family	30	37.5
Joint family	50	62.5
Type of accommodation		
Home	43	53.8
As paying guest	19	23.8

Hostel	18	22.5
Academic education		
F.Sc.(Intermediate)	57	71.2
B.Sc. (Graduate)	23	28.8
Professional year of Generic B.Sc. Nursing		
1 st year	26	32.5
2 nd year	54	67.5

Table 1 gives the frequencies and percentages of demographic variables of male nursing students. More than half of the male nursing students were Pathan. An approximate 60% reported to be emotionally attached with their mothers. Close to ninety percent of the male nurses belonged to the middle socio-economic status. Most of them were living in joint family system as shown in Table 1.

Table 2: Demographic characteristic of Male Medical Students (N=80)

Variables	Frequency (f)	Percentage (%)
Ethnicity		
Sindhi	9	11.2
Urdu Speaking	47	58.8
Bloch	1	1.2
Panjabi	8	10.0
Pathan	7	8.8
Others	8	10.0
Birth Order		
No one	4	5.0
First	26	32.5
Second	19	23.8
Third	17	21.2
Above than third	14	17.5
Emotional attachment with:		
Father	13	16.2
Mother	43	53.8
Brother	3	3.8
Sister	1	1.2
Friend &Other	16	20.0
Marital Status		
Single	80	96.2

Socio economic background		
Lower	6	7.5
Middle	50	62.5
Upper	24	27.5
Family type		
Nuclear family	47	58.8
Joint family	33	41.2
Type of accommodation		
Home	69	86.2
As paying guest	3	3.8
Hostel	8	10.0
Academic education		
F.Sc. (Intermediate)	73	91.2
B.Sc. (Graduate)	7	8.8
Professional year		
1 st year	38	47.5
2 nd year	42	52.5

Table 2 shows the frequencies and percentages of demographic variables of medical students. Approximately 60% medical students belonged to the Urdu-speaking community. Majority of them lived in nuclear family system. None of them was married. Most of them were first-born and belonged to the middle socio-economic class.

Table 3: Demographic characteristic of Female Nursing Students (N=80)

Variables	Frequency (f)	Percentage (%)
Ethnicity		
Sindhi	8	10.0
Urdu Speaking	44	55.0
Bloch	1	1.2
Panjabi	18	22.5
Pathan	3	3.8
Others	6	7.5
Birth Order		
First	28	35.0
Second	17	21.2
Third	16	20.0
	19	23.8

Emotional attachment with		
Father	10	12.5
Mother	43	53.8
Brother	3	3.8
Sister	3	3.8
Friend & Other	21	26.2
Marital Status		
Single	80	96.2
Socio economic background		
Lower	2	2.5
Middle	60	75.0
Upper	18	22.5
Family type		
Nuclear family	59	73.8
Joint family	21	26.2
Type of accommodation		
Home	58	72.5
As paying guest	2	2.5
Hostel	20	25.0
Academic education		
F.Sc. (Intermediate)	51	91.2
B.Sc. (Graduate)	29	36.2
Professional year of Generic B.Sc.		
Nursing		
1 st year	55	68.8
2 nd year	25	31.2

Table 3 shows the frequencies and percentages of the demographic variables of female nursing students. Approximately 75% lived in nuclear family systems. More than half of the female nursing students were Urdu-speaking, and belonged to the middle socio-economic status.

Table 4: Comparison of Male Nursing Students and Medical Students on the trait of femininity

Variable	Male Nursing Students (n=80)		Male Medical Students (n=80)		T	P
	Mean	S.D.	Mean	S.D.		
Femininity	5.543	.8387	4.929	.8518	4.592	.000

An independent t-test was calculated to compare feminine personality characteristics for male nursing students and medical students. There is a significant difference in

score for male nursing students' mean (M=5.543, SD=.8387) and medical students' mean (M=4.929, SD=.8518); t (160 = 4.592, p < .05). The magnitude of the differences in the means was small (eta squared = 0.11).

Table 5: Comparison of Male Nursing Students and Medical Students on the trait of masculinity

Variable	Male Nursing Students (n=80)		Male Medical Students (n=80)		T	P
	Mean	S.D.	Mean	S.D.		
Masculinity	4.935	.9412	4.640	0.8503	-2.080	.039

An independent t-test was calculated to compare masculine personality characteristics for male nursing students and medical students. There is a significant difference in score for male nursing students' mean (M=4.935, SD=.9412) and medical students' mean (M=4.640, SD=.8503); t (160 = -2.080, p < .05). The magnitude of the differences in the means was small (eta squared = 0.02).

Table 6: Comparison of Male and Female Nursing Students on the Trait of Femininity

Variable	Male Nursing Students (n=80)		Female Nursing Students (n=80)		T	P
	Mean	S.D.	Mean	S.D.		
Femininity	5.543	.8387	5.752	.7992	-1.621	.107

An independent t-test was calculated to compare feminine personality characteristics for male nursing students and female nursing students. There is no significant difference in score for male nursing students' mean (M=5.543, SD=.8387) and female nursing students' mean (M=5.752, SD=.7992); t (160 = 4.592, p > .05). Although the magnitude of the differences in the means was small (eta squared = 0.0164), these results suggest that male and female nursing students shared similar feminine personality characteristics.

DISCUSSION

The aim of this study was to investigate the personality traits of male nursing students compared to female nursing students and non-nursing male health-care students. Our primary aim was to evaluate if personality of men in nursing had a connection with their occupational choice. Data was analyzed by SPSS (version 16.00). Two hundred and forty students (80 medical students, 80 male nursing students and 80 female nursing students) were selected to complete the short-form of the BSRI and respond to

demographic questions.

We hypothesized three things about male nursing students; they would have more feminine, but less masculine traits than male medical students, and would obtain scores on the femininity scale similar to those of female nursing students. The results of this study were congruent with our hypotheses. The obtained results urge us to discuss one significant finding; the effeminate qualities possessed by male nursing students. A line of research supports that male nurses identify more with feminine characteristics, whereas male non-nursing students possess more masculine traits (Fisher, 2011). Moreover, male nursing undergraduates report that their career choice reflects their caring and helping personalities, while providing them with job satisfaction (Wilson, 2005). Thus, studies indicate that men with effete personality traits select professions subjugated by women (Chusmir, 1990). The feminine nature of the male nurses can be explained in light of their relationship with their mothers. The demographic result of this study shows that majority (Approximately 60 %) of male nurses who took part in this study were more attached to their mothers than other family members. This finding is consistent with research conducted among men who choose careers primarily dominated by women (e.g. Das, Singh, Pawar, & Guha, 2012). The cultural account of Tongan people also indicated that male community members who had feminine personalities shared an intimate bond with their mothers and older female figures (James, 1994). Therefore, the strong maternal attachment can be a determinant in identification with female gender roles, and selection of the nursing profession by men.

The demographic findings of the study also indicated that a lower percentage (approximately 14%) of male nursing students were emotionally attached to their fathers. According to one study conducted in India, many men in non-conventional professions report having a poor relationship with their fathers. Some of these men had also faced opposition by their fathers because of their career preference (Das, Singh, Pawar, & Guha, 2012). The results of the current study further indicate that majority of the male students (approximately 60%) in the nursing sample were Pathans, whereas most non-nursing male participants did not belong to this ethnic group. The outcome that Pathan men scored higher on traits of femininity is fascinating and paradoxical with the popular view about them since they are considered to be a symbol of masculinity and strength in anthropological texts, historical accounts (Glatzer, 1998; Rzehak, 2011) and in novels such as *The Kite Runner* (Hosseini, 2003).

In a nutshell, following findings about male students in nursing make the highlight of the present research: the presence of feminine traits, particular ethnic background, and strong emotional attachment with their mothers, single marital status, and their vocational selection.

In addition to our primary goal of evaluating personality traits of men in nursing, we also asked the participant the reasons for choosing this line of work. The findings revealed that apart from personality differences, men in nursing also differed with regards to demographics in comparison with non-nursing male students. These are the disparities that might have accounted for in selecting the nursing career. Majority (approximately 90%) of the male nursing students belonged to the middle socioeconomic class, whereas the number of medical students belonging to this class was comparatively lower. Demographic data also unfolded that most of male nursing students were single and as compared to male nursing students, lived in joint family systems where there is greater pressure to hold a stable job, and to support the family members (Wali, 2001; Lindley, & Van Hear, 2007). These findings are congruent with research which suggests that men chose the nursing career because it provides job security, decent opportunities to earn and move forward (Christensen, & Knight, 2014; Yi, & Keogh, 2016; Stanley et al., 2016; Zysberg, & Berry, 2005). Thus, socio-economic background and family structure are found to be contributing factors in selection of the field of nursing by men with the objective to provide financial assistance to their family members.

To sum it up, it seems that on the superficial level, men in our nursing sample selected this profession because of their personality traits, socio-economic status, and family system. However, the ethnicity of male nursing students is the key finding that compels us to view the results on a deeper level. It urges us to explore factors such as effeminate personality traits, close mother-son relationship, and career selection particularly in the *Pashtun* community owing to the findings that are incongruent with their popularized image.

RECOMMENDATIONS

The present research has a few limitations concerning its scope. One limitation of this study is that it was conducted within a limited sample. For further research, it is recommended for it to be conducted on larger samples to increase its generalizability. In addition, the results of the study revealed that majority of the male nurses possessing effeminate traits were *Pathan* (i.e. members of a particular ethnic group in Pakistan). These findings appear to contradict the general beliefs about this particular ethnic community, necessitating further research on *Pathan* culture.

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