Gender, Gender Roles and completion of Nursing Education: A Longitudinal study.

Katrina McLaughlin, Marianne Moutray and Orla Muldoon.

Queen’s University, Belfast, Northern Ireland.
Background

- **Serious nursing shortage worldwide** (Crow et al, 2005; Gould et al, 2006)
  - Global shortage of 4 million healthcare workers (Cooman et al 2008).
  - Current shortage in USA expected to last into 2020, with one in three intending to leave their job (Blais et al 2006).
  - Despite strategies by the Irish Government and health services, nurses continue to leave their current position at turnover rates of 10% (McCarthy et al, 2007).
Background

- Widespread concern over attrition rates of nursing students
- Western Michigan University – 43 out of 236 students dropped out, 18% attrition rate (Sadler, 2003).
- Australian university – review of 2 studies, attrition rate of 25-27% (Gaynor et al, 2006)
- UK institutions between 2000 and 2004 – overall attrition rate of 24%
  - Scotland and London – 29%
  - Wales – 17%
  - Northern Ireland – 9% (Campbell, 2006.)

- Annual financial cost is £57 million (Waters, 2006).
Background

- Costs to many bodies:
  - Government: £11,500 each nursing place/year
  - Schools of Nursing: meeting targets and managing staff morale
  - Patient care: potential loss of expertise and talent
  - Personal cost: students who drop out may suffer emotionally, financially and socially.

- Three core challenges identified by Kigma (2008) director of ICHRN:
  - improving recruitment,
  - enhancing the performance of the existing workforce and
  - reducing the attrition rate of health care workers.
Introduction

- **Individual factors**
  - Age, prior academic experience, personality
  - Low self esteem

- **Institutional factors**
  - Stressful clinical placements, attitudes of other nurses, discordance between theory and practice, financial reasons and lack of support.

- **Key factor in recruitment and retention crisis**
  - Systematic over reliance in one half of the population
  - Men comprise 10.2% of registered nursing staff in the UK (Oxtoby, 2003).
Gender and Career choice

- Gender acts as marker in some occupations – ‘male nurse’
- Research suggests an inherent bias within the nursing education system:
  - Focus group study - feelings of isolation and loneliness (Kelly, 1996)
  - Underlying assumption of nurses as female overuse of pronoun ‘she’ (Inoue et al, 2006).
  - Nurse educators – not just what they say but ‘how’ they say it. (Bell-Scriber, 2008).
Gender roles and gender role identity

- Subjective view of one’s own gender and the perceived appropriateness of jobs
- Nursing - stereotyped as female dominated profession
- Stereotypes can have far reaching implications for the nursing profession:
  - Men tend to avoid careers stereotypically associated with women (Loughrey, 2008).
  - Distort the public’s view of nursing, which may affect the quantity and quality of people recruited (Fletcher, 2007).
  - Serious problems for recruitment and job satisfaction of nurses regardless of gender (Ruth & Coleman, 2008).
The current paper

- **Aim**: To investigate the differences between completers and non-completers in relation to gender, gender role identity and gendered views of nursing careers.

- **Theoretical Framework**: Person environment fit (Dawis & Lofquist, 1984) – perceived compatibility between individual needs/characteristics and their occupational environment.
Method

- Longitudinal design
- Participants – 384 nursing students, 350 female and 34 male completed initial questionnaire
  - 350 were successfully followed up (91% of study).
- Data collection
- Ethical considerations
Data collection - Measures

- Gender role identification (BSRI, Bem, 1974)
  - Psychological attributes consistent with traditional sex role attributes.
  - Psychological femininity, masculinity and androgyny.
- Gendered views of nursing careers
  - Perceived appropriateness of nursing careers for women and men.
- Demographical information – age, gender, date of birth and student numbers
Results

- 350 students successfully followed up:
  - 307 completed, 43 dropped out
  - Attrition rate of 12%.

- Reasons provided for attrition
  - Academic reasons 27%
  - Personal reasons 16%
  - Don’t know 16%
Results

- Gendered views of nursing careers
  - Majority of careers considered to be more appropriate for women
  - Gender neutral — Mental health, accident and emergency, learning disability, theatre, surgical and medical, teaching and management.
  - Highly Feminine/Feminine — Midwifery, school nursing, district nursing, health visiting, paediatric and practice nursing.....
Results – Course completion, gender and gender role orientation

- No significant relationship between gender role orientation and course completion

- Significant relationship between gender and course completion ($\chi^2 = 6.662,1, p=0.009$), males (28%) more likely to withdraw than females (11%).
Results – Course completion, gender and gendered views of nurse careers

- Main effect for course completion – significant difference between completers and non-completers \[ F(3, 344) = 3.3305, \ P=0.020 \].
  - Univariate follow up tests – difference between the completers and non-completers in relation to the gender neutral careers.
  - Those who completed (mean=28.02, sd=2.95), believed that nursing was more appropriate for women than those who did not complete (mean=25.63, sd=2.88).
Discussion

- **Males more likely to withdraw**
  - Consistent with previous research, male nurses 4 times more likely to leave than female nurses (Sochalski, 2002).

- **Course completion was predicted by the extent to which respondents gendered nursing as an occupation.**
  - Those most likely to withdraw were the individuals who initially viewed nursing as an appropriate occupation for both males and females.

- **In line with person environment theory**
  - Issues based on gender and the feminisation of the nursing curriculum may represent a source of resentment and be a cause of gender dissonance (Kermode, 2006).
Conclusion

- Attrition is a multifaceted problem

- Need to be mindful of gender stereotypes in nursing:
  - ‘The hidden curriculum’
  - Important not to advantage men unduly and create vertical segregation
  - Vital that both male and female students irrespective of their own gender constructions can feel comfortable and succeed in nursing