

Fear Based Education;

Impact of the System of Controls on Nursing Students

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Objectives

- Identification of areas of control utilized within nursing education that has adverse effects on students
- Understand the effects of controls on students, particularly minority populations and the implication of these effects on their success

Overview of study

- Phenomenological study
- Explore the pedagogical experiences of male nursing students
- Examine power influences and their impact on students
- Understand the use of controls to require gender performativity in the construction of the ideal nurse

Hierarchical controls

- Use of power and authority to control students/nurses behaviours
- Accomplished through use of surveillance, punishment &/or sanctions and a culture of threat.

Punishment & Sanctions

- “If you're late for class more than once with quite a few of my classes, the door was closed and you weren't allowed to get in. Uh, so you'd miss out on that three hour lecture, which was vital information, and especially with clinical, being late once with a good excuse, you'd probably get away with it. But if you were continually late, you would be kicked out of clinical which would be extremely costly because you'd have to pay for the made-up time at the end.” (Jeff)
- “You had students crying before and after (lab testing)...they were so traumatized by the whole lead-up that if you failed or you didn't perform as well as possible....your done your out of the program....it was disgusting, it was wrong, you should never have a student feel like that” (Doug)

Surveillance

- “I think just in regards to clinical, I did kind of feel like the clinical teachers kept a closer eye on the male students in comparison to the females at first at least just to kind of see where we were coming from.” (Jeff)
- “I had a very big problem with it, almost like a bullying situation....if someone ends up making a mistake, let's say, like something minor, but obviously that we're not supposed to do, I find that they get all the focus from the clinical instructor and they get all of the challenging hard things and everybody else that was doing okay just kind of continues on and isn't challenged as much” (Lisa)

Culture of threat

- “I'm not sure exactly if it's because I was a guy, but I think, I think like it was kind of a trend though, because it seemed... .. like I was the only one that she was really being tough on. And, I don't know it just, it was really stressful for me.” (Travis)
- “I don't think females are exempt from like the horizontal violence that goes on within nursing. And if anything, I think new grad females are more of a target than new grad males.” (Brad)
- “She just gave me a really hard time and it definitely made me second guess wanting to be in nursing, because I hated clinical, I dreaded it. ...she was like instructing by fear.” (Patricia)

Structural controls

- Use of norms to control students / nurses behaviours, attitudes and appearance.
- Accomplished through the use of systemic processes and rules, professional codes of behaviour and desired image of nursing.

Systemic Processes/ Rules

- “Let's leave the choice to the patient to say whether they, they, they want to work with men or women. For me, it's not the institution or the school or ... that have to say: "O.K., that man there cannot work there." No, no, no. Leave the choice to the person. Then, that's all.” (Alex)
- “I think the rejection piece was pretty big in clinical. Uh, for example, I would... most of my clinical instructors would only assign me male patients to look after rather than females.”(Jeff)
- “More issues that I've been having are more administrative. But when talking to people at other schools, it's pretty similar stuff,” (Lisa)

Professional Codes of Behaviour

- “I think in nursing, it comes from a place where they were an assistant role. And I think that nursing as a whole in today's society is striving to become something that is a profession where we're seen as being very autonomous and very, very professional and we're really rigid and strict when it comes to the media around the title of RN or RPN and that we classify ourselves as professionals.” (Jeff)
- “I have to be very careful about what I say, you know, within nursing, they teach you don't use slang language because it is interpreted and is often seen as unprofessional.” (Jeff)
- “That was the biggest thing, the culture, the “professional”, (compared to) the lack of professionalism that I saw, the hypocrisy... Teaching us to be professionals, but, yet, at the same time, this is what you're doing. And I just didn't want to be associated with that.” (Brad)

Image of Nursing

- “I find the mindset of nursing is that it's almost like they want to weed out anyone who doesn't fit the mould. So if you don't talk like a nurse, act like a nurse, look like a nurse, or you're rough on the edges, then you're out of here.” (Jeff)
- “The quintessential nurse as what I've experienced is someone who is always on time, knows everything about their patient or at least knows where to find that information, is very well-versed about what's happening with their patient, medication..... I guess the qualities would be always on time, very knowledgeable, always look very professional. Uh... and I think it still kind of goes back to the, to the visual image where, like, the nurse is in a white uniform with not a single stain on her and it still I think is a female image, not a single stain on her, uh, perfect posture, perfect body mechanics when working, always smiling, uh, excellent grammar, excellent vocabulary and just very well-versed within the medical realm. “(Jeff)
- “To me, I feel like more gender-neutral ways of presenting it and having... in almost like every picture on a brochure, having like male and female nurse. The more you show men, even if it's just dressed up in scrubs with a stethoscope, I feel like it's more open to everybody “(Lisa)

Personal controls

- Self-governance and internalization of rules & expectations is used by the student / nurse to control their behaviours and meet expectations on a personal level.
- Accomplished through the use of self-monitoring, adapting to survive and “never letting them see you sweat”

Self-Monitoring

- “So, to me, it's all my shtick in clinic is self-imposed. No one's ever said, "I expect you to be..." They say..."As students we expect you to - (knocks on table)- you know do this and that.” (Daniel)
- “I think maybe in relating to other female nurses around me, there's a similar thing going on where it's not that I need to conform, change who I am, but I need to keep in mind that there are differences in the way that they're communicating and the way that they're understanding things that I'm saying. So, I don't need to change fundamentally who I am, but I do need to be cautious and aware that there are differences between men and women and, its just that they're different, they're made different.” (Justin)
- “I have to be very careful about what I say, I can't use, you know, within nursing, they teach you don't use slang language because it is interpreted and is often seen as unprofessional.” (Jeff)

Adapt to Survive

- “I find just adopting a professional attitude, at least in the workplace, you get taken seriously if you act serious” (Tim)
- “I felt very, you know, in a sense trapped because this person had a lot of power over me, to, you know, give me passing grades or failing grades. I felt like communication was just wretched. The way I had to communicate from thenceforward was, you know, very careful, you know, I... there's many hoops, it's like walking on egg shells. I just had to be very careful and mindful of what I was saying” (Justin)

“Never let them see you sweat”

- I'm always the one to answer, because I'm just like, in awkward silences, no one else is going to speak up because everyone's terrified of being wrong. (Daniel)
- The guys would typically get very frustrated and angry and maybe walk off and take, you know, a breather and collect themselves” (Doug)
- “I felt like..” Okay, I have to make a good impression and I have to work well with these people so that my life isn't a living hell, and use my charm to accomplish that”(Cameron)

Impact of controls

- System of controls has a significant effect on the educational experience of students in general, but specifically male students.
- Also has an adverse impact on other marginalized populations within nursing.
- The outcome of these effects is often withdrawal or failure from the nursing program or withdrawal from the profession.
- Significant impacts identified are; anger, frustration, confusion re expectations, self-doubt, isolation/marginalization, not being self (faking it) and justifying presence

Fear Based Education

- “I was told I would be inserting a NG tube into an infant. I wanted to check the policy first, it was my first time, but the instructor said there was no time. When we got to the patient room she asked me what I was going to do first. I answered, she asked again, I answered... this continued for about 5 mins. The parents were at the bedside, I got more and more embarrassed and frustrated. I just didn't know what she wanted and I was afraid to ask. If I could have, I would have quit that day. I don't know why she did that, she let other female students do the same procedure on their own” (Jeremy)
- “One of the teachers in the program asked, "What brings you in the nursing program?"...And when I answered and the professor said, "Oh, I thought that it was for money.“ (Alex)

Fear Based Education

- “It came across that they just didn’t want me there, in front of the entire class she called me heartless for no reason...I was embarrassed”(Brad)
- “ They push for the males to express themselves so I did and now I am being penalized for it. It just wasn’t the feeling they wanted to hear. I was failed because of it” (Corey)
- “It was a huge eye-opener how strict it was. I had no idea it was going to be so extremely strict and rigid... if you’re late for class, you’re locked out, if you hand in an assignment late, often you get a zero, if you come late for clinical you got sent home... I couldn’t sleep before clinical, it was such a stressful experience”(Doug)
- “So I always felt like....I had to prove myself ...because I was a guy” (Jeremy)

Fear Based Education

- “Sometimes I just wanted to get really angry but I knew that I couldn't do that because I didn't want to get in trouble.”
(Travis)
- “They hear that mentality, "Oh, you're not at the right place." So some base on that will say, "Oh, it's my fault if I'm here if people do this or do that to me.” (Alex)
- “My friend, who's the very interpersonal person, she is very much, like doesn't address anything. Like, she'll be quiet. She'll acknowledge it with me, we'll discuss and make fun about things, but when it comes to dealing with profs and stuff, she's, she shuts up. She's like, "I understand, but I just don't want to screw with them, I don't want to, like, put myself out there and make myself like a target.” (Brad)

Fear Based Education

- “I was with some of my female friends from class and we were deciding who to nominate as valedictorian for the class. I said I would like to do it and they responded “You don’t represent us”,....I was shocked and hurt” (Tim)
- “I think there was a requirement to adapt to a certain behaviour, a certain mindset... I started with ten males in my first year, the number of people who graduated from that, there were three... you’re failing 70% of one subgroup, it ... to me, it doesn’t sort of fit”(Julia)
- I think my profs destroyed the entire view of the profession for me. To think that somebody in that position to educate future nurses were that awful, how awful are the nurses on the floor? (Brad)

Thank You

Questions

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