Examining Attitudes of Acceptance of Males in Nusing Among Registered Nurses

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Purpose:

Collaboration and teamwork, both inter and intra-professionally, are essential skills for the nursing profession (American Nurses Association, 2015; International Council of Nurses, 2012; QSEN, n.d.) and deemed a necessary component for positive patient outcomes, nurse satisfaction, and nurse retention (Suter et al., 2012). One factor to consider when examining ability to collaborate and work together is attitudes of acceptance between different work groups. In the case of nursing, male and females constitute two distinct work groups. Since males are typically a minority in the nursing workforce, it is important to determine if there are issues with attitudes of acceptance that may interfere with teamwork and collaboration.

Males are generally underrepresented in the nursing workforce worldwide. Males comprise 6.4% of the RNs in Canada (Canadian Nurses Association, 2012), 9.5 % in South Africa (South African Nursing Council, 2017), 9.6% in the U.S. (United States Census Bureau [USCB], 2013), and 11.5% in Australia (Nursing & Midwifery Board of Australia, 2016). Efforts to increase the number of men in nursing are important to improve inclusivity of male patients and decrease health disparities (Robert Wood Johnson Foundation, 2011) in addition to enhancing the nursing profession (Committee on the Robert Wood Johnson Foundation Initiative on the Future of Nursing, at the Institute of Medicine, 2011). Despite the recognition given to the importance of improving the ratio of males in nursing, the number of men in nursing has only grown approximately 7% over the past 40 years in the United States (USCB, 2013). This raises the question, why gender diversity in nursing has not been more rapid? This question could be explored from both recruitment and retention perspectives. The latter was the approach chosen for this study.

The purpose of this non-experimental, correlational, descriptive study was to investigate if the attitudes of acceptance of male nurses are different between male and female nurses, by comparing male and female nurses' scores on the Sexist Attitude Inventory, and to explore correlations between female nurses' levels of acceptance and certain demographic variables.

Methods:

A convenience sample of all male and female nurses employed at three health care facilities within the same health system in the Midwest was utilized. Data was collected from May 9th - May 31st, 2017 via an online anonymous survey. The Sexist Attitude Inventory (SAI) was used to measure attitudes of acceptance of male nurses. Bentivegna (1974) originally developed this tool to measure the attitudes of acceptance of female home economics professionals of males in the same profession, but envisioned it to be used by other professions that are dominated by one sex. The higher participant's score on the SAI, the greater the attitude of acceptance of males in that profession. The tool was successfully adapted and utilized in a nursing study by McMillian, Morgan, and Ament (2006) which included changing the title of the tool to "Attitude Inventory" along with replacing all of the terms "home economics" with "nursing" within the tool itself. These same adaptations were also employed in this study.

The SAI was developed via the solicitation of statements of attitudes regarding males entering this female dominated profession by sending 200 open-ended questionnaires to male and female faculty and graduate students in the profession or related professional disciplines at a large, eastern U.S. university. The 127 responses received were refined into 46 item survey and piloted with 175 male and female graduate students in home economics and related fields at this same university. The Kuder-Richardson

formula 20 (KR20) for the 46 items in the survey is .996 (Bentivegna, 1974) and .826 (Bentivegna & Weis, 1977). Cronbach's alpha for the tool in its original form is .87 (Bentivegna, 1974) and .832 (Bentivegna & Weis, 1977) and .87 in its altered form (McMillian et al., 2006). In this study, the Cronbach's alpha was .83.

A total of 435 nurses submitted surveys. Participants who did not identify gender or answer all of the SAI items were eliminated from the analysis. This resulted in a final sample of 311 nurses (251 females and 60 males; 72% of the original participants). Per McMillian et al. (2006), a response rate of 144 completed surveys was necessary to reach power and statistical significance.

Results:

Total SAI scores ranged from 118-154 for males and 108-160 for females. The mean score for males was 137.42 (SD= 9.06, SE=1.17) and 130.52 (SD =9.45, SE=0.59) for females. The difference between the males and females total SAI scores, 6.90, Ca 95% CI [4.25, 9.55], was significant $t(309) = 5.12$, $p < 0.001$.

There was a significant, positive correlation between the female's highest-held nursing degree and attitudes of acceptance (n = 251), rho = .21, p = 0.001. There was not a significant correlation between the female's age (n = 251), r = -.08, p = 0.19, years of nursing experience (n = 244), r = -.09, p = 0.17, number of male pre-licensure program classmates (n = 221), r =.07, p = 0.32, and number of male pre-licensure program faculty (n = 240), r = .10, p = 0.11 and attitudes of acceptance.

A t-test for independent groups was conducted to compare the scores of the male and female nurses on each item of the SAI. Significant differences ($p < 0.05$) were noted on 24 of the 46 items. Insights into the relationship between male and female nurses were also gleaned from the items for which both genders agreed upon.

Conclusion:

Although it appears when comparing the female nurses' SAI scores to McMillian et al.'s (2006) results that attitudes of acceptance of male nurses have improved, their level of acceptance was still significantly less than male nurses' attitudes of acceptance of male nurses. The only variable found to be correlated to the female nurses' attitudes of acceptance was education. This positive correlation provides some additional support for nursing employers to encourage and assist their nursing staff's degree advancement.

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References:
American Nurses Association. (2015). *Code of ethics for nurses with interpretive statements.* Silver Spring, MD: Author.

Retrieved from http://nursingworld.org/DocumentVault/Ethics-1/Code-of-Ethics-for-Nurses.html

Bentivegna, A. M. (1974). *Attitudes of home economics college and university professionals toward males entering the field*

(Doctoral dissertation). Retrieved from ProQuest Dissertations & Theses Global. (Order No. 742894).

Bentivegna, A., & Weis, S. F. (1977). Attitudes of acceptance toward males entering the home economics profession. *Illinois*

   Teacher of Home Economics, 20(5), 230-236. Retrieved from https://www.ideals.illinois.edu/handle/2142/28466

Canadian Nurses Association. (2012). *2010 Workforce Profile of Registered Nurses in Canada.* Ottowa, ON: Policy and

   Leadership Division. Retrieved from https://www.cna-aiic.ca/~/media/cna/page-content/pdf-en/2010_rn_snapshot_e.pdf

Committee on the Robert Wood Johnson Foundation Initiative on the Future of Nursing, at the Institute of Medicine; Institute

   of Medicine. (2011). *The future of nursing: Leading change, advancing health.* Retrieved from

   http://www.iom.edu/Reports/2010/The-future-of-nursing-leading-change-advancing-health.aspx

International Council of Nurses. (2012). *The ICN code of ethics for nurses, revised.* Geneva, Switzerland: Author. Retrieved

   from http://www.icn.ch/images/stories/documents/about/icncode_english.pdf

McMillian, J., Morgan, S. A., & Ament, P. (2006). Acceptance of male registered nurses by female registered nurses. *Journal of*

   Nursing Scholarship, 38(1), 100-106. doi: 10.1111/j.1547-5069.2006.00066.x

Nursing and Midwifery Board of Australia. (2016). 2015/2016 Annual Report Summary. Retrieved from

   https://www.ahpra.gov.au/annualreport/2016/html/board-summaries/nmba-summary.html

Quality and Safety Education for Nurses. (n.d.). QSEN competencies: Definitions and pre-licensure KSAs. Retrieved from

   http://qsen.org/competencies/pre-licensure-ksas/

Robert Wood Johnson Foundation. (2011, September). *Male nurses break through barriers to diversify profession.* Retrieved

   February 26, 2016, from http://www.rwjf.org/en/library/articles-and-news/2011/09/male-nurses-break-through-barriers-

   to-diversify-profession.html

South African Nursing Council (2016). *Provincial Distribution of Nursing Manpower versus the Population of the Republic of*

South Africa. Retrieved from http://www.sanc.co.za/stats/Stat2016/Year%202016%20Provincial%20Distribution%

20Stats.pdf

Suter, E., Deutschlander, S., Mickelson, G., Nurani, Z., Lait, J., Harrison, L., . . . Grymonpre, R. (2012). Can interprofessional

collaboration provide health human resources solutions? A knowledge synthesis. *Journal of Interprofessional Care, 26*(4),

261-268. doi:10.3109/13561820.2012.663014

United States Census Bureau. (2013, February). *Men in nursing occupations: American community survey highlights.*Retrieved

from https://www.census.gov/people/io/files/Men_in_Nursing_Occupations.pdf

Abstract Summary:
Teamwork and collaboration are necessary skills for the nursing profession. However, if male nurses to not feel accepted by their female nurse colleagues, these necessary skills may be impeded. The results of a study comparing male and female registered nurses attitudes of acceptance of male nurses will be discussed.

Content Outline:
I. Introduction

    A. Necessity of collaboration and teamwork among male and female nurses
        a. Male nurses
        b. # of them internationally
    B. Slow growth despite professional nursing organization recommendations

II. Literature Review

    A. Job satisfaction
    B. Career opportunities
    C. Relationships with female nurses
    D. Study purpose and how it addresses gaps in the literature

III. Theoretical Framework-Kanter's Theoretical Framework of Group Proportions

IV. Research Questions

    A. Do male and female nurses differ in their attitudes of acceptance of male nurses?
    B. Does level of education, age, and years of nursing experience correlate with female attitudes of acceptance of male nurses?
    C. Does exposure to male classmates and male faculty during the female's pre-licensure education correlate with attitude of acceptance?

V. Methods

    A. Design, sample, and recruitment

        a. Non-experimental, descriptive, correlational design
        b. Convenience sample of the nurses employed at three health care facilities within the same health system in the Midwest
        c. Recruitment via email, with a brief description of the study, all necessary study disclosures, and a direct link to the Sexist Attitude Inventory (SAI)
            i. 3,190 nurses invited to participate (no matter their role in the facility or their department)
            ii. 435 nurses responded to the survey, and 311 participants (251 females and 60 males; 72% of the original participants) answered all SAI items and identified their gender

  B. Instruments
        a. SAI
            i. Tool information and history
            ii. Tool modifications
            iii. Tool validity and reliability information
        b. Personal data sheet

  C. Analysis Methods
        a. Descriptive statistics
        b. Paired t-tests to compare male and female nurses' total and individual item SAI scores
        c. Pearson's correlation coefficient and Spearman's rank correlation coefficient to determine correlations between the female nurses' total SAI score and the various demographic variables collected
        d. Cronbach's alpha = .83

VI. Results

  A. Sample characteristics
  B. Research question #1
  C. Research question #2
  D. Research question #3

VII. Discussion

  A. No comparison data for male nurse SAI scores
  B. The female nurse participants' SAI score range and mean for this study was higher than that of the female nurses in the McMillian, Morgan and Ament (2006) study
  C. There was a small, positive correlation between the female nurse's highest-held nursing degree and attitude of acceptance-inconsistent with the findings from the McMillian et al. (2006) study
  D. There was not a significant correlation between the female nurse's age and attitude of acceptance-congruent with McMillian et al.'s (2006) results
  E. The number of male pre-licensure program classmates and male pre-licensure program faculty and the female nurse's attitude of acceptance were not significantly correlated
  F. The high-level of recall for male participants of the number of fellow male students and faculty in comparison to the female participants in this study
  G. Valuable insights gained via the comparison of individual SAI items

VIII. Limitations

  A. First time the SAI has been administered to male nurses, so comparison data does not exist
  B. Self-selection to participate
  C. Although power was met, the response rate was less than desired
  D. Participants were also informed of the purpose of the study which may have caused a Hawthorne effect

E. Although the participants were selected from three different health care facilities, they all were from one health system and may not be representative of nurses in other regions of the state, other states, or other health care environments
F. Conclusions and Recommendations
G. Only variable found to be correlated to the female nurses' attitudes of acceptance was education-provides some additional support for nursing employers to encourage and assist their nursing staff's degree advancement
H. Due to the female nurses' in this study perception that male nurses receive larger salaries and higher rank than female nurses with the same education and that males obtain leadership positions easier because they are the minority in the profession, nursing employers are encouraged to analyze their nurses' salaries and investigate the composition of their nursing leadership, management, and educators by gender.
I. Development of a taskforce to explore teambuilding opportunities for male and female nurses as a means of fostering their relationship should be investigated
J. Investigate the establishment of a chapter of an organization focused on male nurses or pursuing designation of the health care facility as a workplace of excellence for male nurses, if either of those options exist for their country
K. Analysis of the SAI utilizing nursing population data to identify subscales or items that may not fit this population
L. Additional replicative studies with male nurses in different environments

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Professional Experience: 2005-Present Assistant Professor, College of Nursing and Health Professions, Romeoville, IL This study was conducted as part of the completion process for the DNP degree at Lewis University. It was successfully defended in August 2017.
Author Summary: Stephanie Gedzyk-Nieman has been an Assistant Professor at Lewis University since 2005. She has taught both clinical and theory in both the BSN and BSN Accelerated programs. She is passionate about improving gender diversity in nursing and chose this as her topic of interest for the completion of her DNP degree.