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Article:

Nursing is one of the world's most diverse occupations. It offers a variety of workplace settings, client populations, and healthcare specialties. Challenging and rewarding careers exist in direct patient care, administration, education, and advanced practice nursing, to name a few. Workforce demand is usually high, and with some retooling or additional education, nurses can develop expertise in other areas of the profession.

One might think that the focus on helping people, the autonomy, the opportunity for career advancement, and the opportunity to work in a variety of geographic areas would be attractive to men across the nation, but that doesn't seem to be the case. Traditionally, nursing has been and continues to be a female-dominated profession. Some feel that nursing should remain a "female" profession, but the fact is, to meet rising healthcare demands, we'll need to recruit and retain more men.

Diversity needs

Most people readily agree that we should produce a registered nurse workforce that reflects the diversity of the population we serve. With that goal in mind, we'd need to increase the proportion of men in nursing by more than nine times from the current 5.7% to 49.1%, which matches the proportion in the U.S. population.^{1,2} Though we also need to increase proportions of other groups, such as African Americans and Latinos, the greatest disparity lies in the category of gender. An increase of 900% may seem unobtainable, but we're actually making some progress, albeit slowly, since 1980 when men made up only 2.7% of the registered nurse workforce.¹ Doubling the current 5.7% would add more than 165,000 nurses, but we can't wait 20 years for that to happen. Men are the largest untapped resource for potential nurses, and as nurses already practicing in the field, we must help our cohorts identify strategies to make nursing more appealing to men.

When professions such as medicine and pharmacy opened their doors to women, the infusion occurred rapidly. The case hasn't been the same for men in nursing. Diversity in nursing is a slow process. While women and men bring with them different gender and cultural backgrounds, the predominant reason each enters the field is a desire to help people. We need to integrate gender and cultural differences in the delivery of patient care services. Diversity issues are particularly important in a service industry such as healthcare because effective communication and interactions are essential to positive patient outcomes.

While different ways of thinking, processing, and interacting may actually slow the decision-making process, it increases creative ideas and thoughts and improves problem-solving. The end result: more predictable and reliable outcomes. A unit culture that welcomes diversity can decrease interpersonal conflict and improve teamwork. A diverse staff can make employment more attractive to potential employees that are part of underrepresented groups. A diverse team can respond with greater flexibility to a rapidly changing healthcare environment. The bottom line: organizations that learn to manage diversity effectively acquire a competitive advantage in the delivery of quality patient care.

Gender issues

The literature cites a number of gender barriers for men in the nursing education process, mainly due to feminization of both the process and the profession. In one survey, a majority of men in nursing perceived a number of barriers affecting nursing education.³ Researchers concluded that "the barriers confronted by men in nursing school are pervasive, consistent, and have changed surprisingly little during the past few decades."³ Conceptually, the barriers identified in the study can be grouped into one of three categories: social isolation, refusal to address individual learning needs, and reluctance to acknowledge men as a vital part of the nursing profession.

1. *Social isolation:* Men aren't encouraged to seek peer support from other male students. Few or no male faculty members are available, and there are few opportunities to work with men in the clinical setting. Men report that often there are no other men in nursing classes, and at times they're discouraged from participating in all student activities.

2. *Refusal to address individual learning needs:* Male students receive little or no mentorship. Professors use a lecture format exclusively in class, and the program doesn't prepare male students to work primarily with women. A majority of the male students reported that professors didn't present any content on communication style differences between men and women.

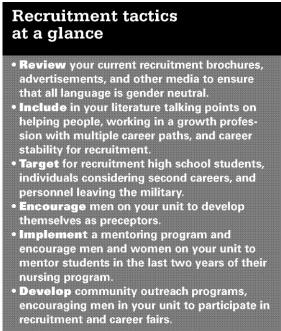
3. *Resistance to acknowledge men as a vital part of the nursing profession:* Texts and lectures omitted information on the history of men in nursing, and textbooks and faculty referred to the nurse as "she" rather than she/he. The men reported hearing faculty make anti-male re-marks in the classroom. They said they didn't feel welcome as students in the clinical setting. A majority also reported that their program didn't actively recruit men.

Experts believe men in nursing face "gender bias" and even "discrimination."⁴ Denying men full participation in clinical experiences was viewed as discriminatory. Experts recommend the following strategies to reduce gender bias in nursing education:

- Match male nursing students with male academic advisors.
- Minimize isolation of male students by grouping them with other males in classroom and clinical settings.
- Integrate references about the contributions of men in nursing.
- Evaluate test items to avoid gender distinctions related to caring and caregiving.
- Select nursing texts and resources that portray diversity.
- Customize teaching strategies to match individual learning styles.⁴

Men in nursing findings

An Internet-based survey conducted by the Bernard Hodes Group sampled 498 men in nursing and found that the top reasons men enter nursing are a desire to help people, work in a growth profession with many career paths, have a stable career, and be able to work in a variety of geographic locations.⁵ Forty-four percent entered nursing as a second career, 20% entered a nursing program immediately out of high school, and 17% entered nursing after serving in the military. Forty-five percent plan to return to school for an advanced degree. The top circumstances the respondents felt created special challenges to men pursuing nursing careers were the existence of stereotypes, nursing's categorization as a traditionally female profession, the viewpoint that other professions are more appropriate for men, and a lack of male role models and mentors.



Eighty-three percent said they'd encourage their male friends to become nurses. When asked what they'd say to encourage other men to enter nursing, one answered, "You'll gain great personal satisfaction and growth, take advantage of job stability, be in a growth profession, have access to a career path, and garner good compensation." Another wrote: "Forget about archaic gender stereotypes. It's okay to be nurturing, compassionate, and be a man."

Fifty-six percent reported encountering difficulty in their nursing program related to being a minority gender, being seen as "muscle" by female nurses, being perceived as uncaring, and communication issues with female counterparts. Respondents identified the same four issues as difficulties in the workplace, but the issue of being seen as muscle by female nurses moved to first place and was reported by 71% of the respondents.

What men in nursing enjoyed most about their work-day were caring for others and providing patient care, the variety of work and challenges, and making a difference. What they liked least about their workday were workloads and pressure, inadequate staffing, and paperwork. Most likely, if we surveyed female nurses, we'd find very similar likes and dislikes in today's workplace.

Recruitment strategies

To ensure the delivery of quality patient care, hospitals must include recruitment of men into nursing as a part of their marketing and workforce strategies. Consider the following:

• Review your current recruitment brochures, advertisements, and other media strategies to make sure all media are gender neutral. Elements you could incorporate include the use of "she/he" instead of just "she," and the use of gender-neutral fonts and colors. Market-test new media strategies to determine perceptions of both women and men. Graphics and photos in all your marketing materials should represent a variety of gender and ethnic diversity. Don't forget to consider the placement of photos. For example, if you have a brochure that focuses on registered nurses and nursing assistants, and photos of men are only included in the nursing assistant section, then readers might perceive that the role for men in your organization is the nursing assistant position.

• Include talking points on helping people, working in a growth profession with multiple career paths, career stability, and the ability to travel and work in a variety of geographic locations.

• Target for recruitment high school students, individuals considering second careers, and personnel leaving the military.

• Encourage men on your unit to develop themselves as preceptors. Ask nurse educators in your region if they'd like to schedule their male students to participate in that clinical experience.

• Implement a mentoring program and encourage men and women on your unit to serve as mentors for students in the junior or senior year of their nursing program. They could mentor men, but also women who are interested in learning more about male communication and learning styles. Note that some men may prefer a female mentor. The goal is to address individual learning needs.

• Develop community outreach programs. Encourage men in your unit to participate in recruitment and career fairs. Increase the visibility of men in nursing to high school and middle school students. Some hospitals are using men in nursing to mentor high-risk, middle school boys. Others are hosting 1-week career exploration summer camps for boys interested in nursing. (See "Recruitment tactics at a glance.")

The work setting

How do we better integrate men into the hospital and healthcare workplace setting? Strategies that focus on diversity can be helpful. When you specifically examine gender, men in nursing may differ from women in some ways yet prove very similar in others. People are both the same and different. We need to make the workplace a welcoming setting for women and men. Consider implementing some of the following strategies:

• Make sure workplace diversity is included in your organization's mission statement. Review your diversity action plan to determine what your hospital is doing to encourage diversity. If your organization doesn't have a diversity action plan, develop one.

• Ask your manager to include more than one male in a group activity whenever feasible. The experience of being one of any minority in a group takes on different connotations. Inclusion of more than one man helps to reduce feelings of social isolation and tokenism. If you have two or more men beginning employment in your hospital, you might schedule them in the same orientation group.

• Identify individual learning styles and needs during performance appraisals for both men and women. Encourage your continuing-education department to provide programs and presentation formats that meet those needs and preferences.

• Ask administrators to promote educational programs that increase cultural sensitivity, decrease stereotyping, develop skills for working in multicultural environments, and compare and contrast male and female communication styles.

• Suggest that your unit initiate work culture assessment and change activities. Ask a group of 8 to 10 men working as nurses in your organization (or in your unit) to respond to the following questions:

- What can our organization (our unit) do to make you feel welcome and valued?
- What can our organization (our unit) and members of the group do to assist you to provide quality patient care?
- What can this organization (this unit) do to recruit more men?
- Use resources in your unit that positively portray men in nursing. Ensure that the text is gender-neutral.
- Implement no-lift or minimal-lift policies to decrease perception of men in nursing as "muscle."

Nursing offers a variety of challenges and rewards to both men and women. It's almost certain that females will dominate the profession for years to come, but we must move rapidly to acculturate more men into the

profession. We need more men in nursing. This will require changes in nursing education, the workplace, and recruitment processes. Our profession must evolve to meet the changing healthcare needs of our patients.

References

1. U.S. Department of Health and Human Services, Health Resources and Service Administration. The registered nurse population: National sample survey of registered nurses. March 2004. Available at: http://bhpr.hrsa.gov/healthworkforce/reports/ rnsurvey/default.htm. Accessed January 6, 2006.

2. Smith D, and Spraggins R. Gender 2000: Census 2000 Brief. U.S. Census Bureau. Available at: <u>http://www.census.gov/prod/</u> 2001pubs/c2kbr01-9.pdf. Accessed January 6, 2006.

^{3.} O'Lynn C. Gender-based barriers for male students in nursing education programs: prevalence and perceived importance. *J Nurs Educ.* 2004;43(5):229-236.

4. Anthony A. Gender bias and discrimination in nursing education: can we change it? *Nurs Educ*. 2004;29(3)121-125.

5. Bernard Hodes Group: Men in Nursing Study. Available at:

http://www.hodes.com/healthcarematters/index.html?he meninhcsurvey.asp. Accessed January 6, 2006.