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Analysis and enhancement measures on the professional identity of male nurses

A literature review

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Abstract

Background: Nurses are the largest and vital component of the healthcare industry. The nursing brain drain, as well as the instability of the nursing workforce, is exacerbated by several factors, including a lack of potential educators, high turnover and an inequitable distribution of the workforce, along with the ageing of the society's population. The shortage of male nurses, in particular, has been given high priority.

Aim and purpose: The aim was to analyse the current situation of the professional identity of male nurses and to propose relevant measures to increase male participation in nursing. The purpose was to reduce gender-based stereotypes and to increase the professional identity and motivation of male nurses.

Implementation method: The authors conducted a literature review and retrieved a large amount of data from PubMed and CINAHL databases. Twelve articles (seven selected by each author, with two duplicates) were reviewed and analysed using inductive content analysis.

Results: The factors influencing the professional identity of male nurses were analysed in terms of existing stereotypes, the stress of nursing, and the pressure to feel the role. At the same time, measures to strengthen the professional identity of male nurses were proposed in terms of social guidance and policy, clinical practice and education, and education in schools. The results of the analysis indicate that the external world should give high priority to positive measures to enhance the professional interest of male nurses.

Conclusion: Effective interventions should be taken to tap into the rich connotations of male nurses' professional interests and guide male nursing staff to change their perceptions rationally that objectively and practically sort out and feel their professional concerns so that they can positively perceive and evaluate their careers. They can enhance their sense of professional interest, strengthen their professional identity, engage in their work with gratitude and give back to their professional interest.

Keywords/tags (subjects)

Male nurses, Male nursing students, Professional identity, Enhancement measures, Gender stereotypes, Role pressure

Miscellaneous (Confidential information)

No.

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Abbreviation

WHO – World Health Organization

ICN – International Council of Nurses

AMN – American Mobile Nurses

ANA – American Nurses Association

AHO – Africa Health Organisation

APA – American Psychological Association

1   Introduction

Nursing involves the provision of self-directed and co-operative care related to illness and health for individuals of all ages, families, teams and communities in any setting. With the aim of promoting health, preventing disease, as well as caring for the sick, disabled and dying (World Health Organization [WHO], 2020). Advocacy, promotion of a safe environment, research, participation in the development of health policy and regulation of patients and healthcare systems, in addition to education, are also key to nursing (International Council of Nurse [ICN],2002).

Nurses, in turn, fulfil a crucial role in the provision of healthcare as often the unknown heroes of the healthcare delivery system and emergencies. They are frequently the first to become aware of wellness emergencies as well as working on the front lines of illness prevention and delivering primary health care in terms of advocacy, prophylaxis, treatment and rehabilitation. They are often the first and sometimes the only health professionals seen by patients, whose preliminary evaluation and the quality of follow-up support is critical to the achievement of robust health outcomes (WHO, 2020).

Nurses are composed of male and female nurses, and women have dominated the field from Florence Nightingale to the present (Mao et al., 2020). At the same time, there is a substantial imbalance in the ratio of male to female nurses today owing to issues such as social opinions which is based on gender stereotypes, men's own perceptions and unequal remuneration (Vere-Jones, 2008, pp. 18–19).

However, the increasing diversity of medical conditions and the growing demand for specialized hospitals are increasing the needs for male nurses. Better gender parity and experience among health care providers has benefits for patient care and recovery, while the characteristics of health care providers that correspond to the patient population may be essential for more efficacious treatment and positive recovery outcomes. Concurrently, increasing the proportion of male nurses will help to change social stereotypes (American Mobile Nurses [AMN], 2021), which in turn will enhance the professional identity of male nurses.

The aim of this literature review is to analyse the current situation of the professional identity of male nurses and to propose relevant measures to enhance male involvement in nursing, with the

purpose of reducing gender-based stereotypes as well as increasing the professional identity and motivation of male nurses.

2 Background

2.1 Nursing and male nurses

Nursing as a specialty in the health care department which concentrates on caring for individuals, households and communities to enable people to realise, maintain or restore optimum health and high quality of life. Nurses are the largest component of most health care settings (Maymoun & Sohail, 2020). Traditionally, the role of the nurse is to provide care to patients under the prescription of the physician, which has shaped the public image of the nurse as a care provider. Since the post-war era, the education and profession of nurses has witnessed a process of diversification and development. Not only is there a move towards advanced and professional certification, many of the traditional regulations and roles as nursing providers are altering (Jayapal & Arulappan, 2020). They practise in many specialties and have varying degrees of prescriptive authority.

In terms of work, nurses identify the patient's symptoms, take measures within their scope of practice, assist with medication, provide other measures to relieve symptoms and work collaboratively with other professionals to optimise the patient's comfort as well as the family's understanding and adaptation (American Nurses Association [ANA], 2016). The nurses facilitate and coordinate the work of all the specialists in the multidisciplinary team and act as a bridge between the physicians and the patients. Nurses incorporate their requests and recommendations into the care plan and work with other professionals who participate in the care to integrate the medical process. They are the backbone of ensuring continuity of care across the medical process and facilitating the achievement of medical goals, including follow-up visits. (Taberna et al., 2020). Nurses are both interdependent with doctors and independent in providing care as nursing professionals (Africa Health Organisation [AHO], 2018). The World Health Organization has declared 2020 the Year of the Nurse and Midwife to honour the 200th birthday of Florence Nightingale, an advocate and pioneer of the nursing profession, with the designation celebrating and underscoring the dedication of nurses and midwives. According to the World Health Organization, nurses and midwives make up more than half of a country's health workforce in many countries (Brennan, 2020).

The history of nursing is almost entirely a history of female achievement, although men have been nursing since the beginning of the profession. Throughout the years of the plague outbreaks in Europe in the 14th and 15th centuries, male nurses had a heavy workload. In the 14th century, the Alexian brothers existed as a Christian religious community with a strong emphasis on caring for the weak (Arif & Khokhar, 2017). In the 16th century, St. john of god founded the Brothers Hospitallers of Saint John of God, which continues to care for the sick today (*Who We Are – About Us | Hospitaller Order of St John of God*, 2020).

From a historical perspective, men have had a presence in nursing for as long as written records have existed. However, few people were aware of their presence and contribution, with the dominant factor shaping this historical pattern being the female nursing movement of the 19th century (Mackintosh, 1997). In the 19th century, Florence Nightingale, the founder of nursing, argued that nursing, as an expansion of women's domestic roles, was work suitable for women. She established nursing firmly as a female profession. Soon afterwards, a model of family-based institutions emerged and the concept of the male nurse was incompatible with this prevailing model, so male nurses dwindled (Arif & Khokhar, 2017). Nevertheless, one has to acknowledge that men have an equivalently valid historical role in nursing when it comes to considering the position of male nurses in the nursing profession. (Mackintosh, 1997).

Despite this, from a historical cross-sectional perspective, women make up the majority of the nursing profession and academic fields. In the US, women make up the most part of the nursing field, accounting for 86% of registered nurses (RNs) in 2021; globally, women make up 89% of the nursing workforce (WHO, 2021). It is clear that there is a significant gender imbalance in the nursing profession.

2.2 Professional identity

Professional identification is a form of social recognition, a sense of belonging to an occupation, e.g. law, medicine, and the degree to which an individual defines himself or herself as a part of that career (Ashforth & Mael, 1989). Professional identity involves an individual's adjustment of roles, duties, values and moral standards to conform to the accepted practices of his or her particular profession (Goltz & Smith, 2014). According to psychologist Van Lente, the four markers of professional identity are: competence, ability to get the job done, growth, and a sense of

achievement. Commitment, a willingness to commit, loyalty and seeing it as part of oneself. Reward, matching the commitment. And satisfaction, where work and self are not in conflict and come naturally.

It has been noted that the evolution of professional identity is an ongoing process influenced by a range of factors, including practical experience and professional socialisation. Much of this development occurs as individuals complete their university courses. Professional identity is considered to be a dynamic phenomenon that evolves from university study to the working life of health professionals (Matthews et al., 2019).

In the healthcare environment, professional identity has a very important role to play (Matthews et al., 2019). Firstly, a person's occupation can be an important source of personal meaning. To be specific, the way in which a person defines themselves in their professional role can be an invaluable instrument for individuals to use to learn about and define themselves, as well as their broader life goals (Caza & Creary, 2016). Along with being a tool for creating meaning, a person's professional identity also affects his or her spiritual health (Tajfel & Turner, 2001, pp. 94–109). By constructing a professional identity, individuals are enabled to assert their aim and significance of their working lives, as well as interpret how they can contribute to society. It defines the boundaries of practice and helps to limit role confusion, notably in interdisciplinary teams.

Indeed, it has been found that one of the main influences on practitioners' perceptions of professional values and confidence in advocating their own professional views is the lack of a definitive professional identity. This difficulty, in turn, can affect educators' confidence in instilling appropriate professional expertise and values into their students. Furthermore, a poorly clarified professional identity can lead to practice becoming less prominent and increasingly oriented towards the emergence of larger issues within the profession such as the role of "filling in the blanks of other professions". (Matthews et al., 2019).

Professional identity is the cornerstone of professionalism which offers an ethical framework for our work (Rees & Monrouxe, 2018). Since valuable role identification is associated with feelings of effectiveness and self-esteem. So when a person agrees with a vocational role, there may be psy-

chological gains (Ervin & Stryker, 2001). Hence, an important source of becoming well-being, self-esteem and dignity is to associate oneself with a prestigious occupation.

In society, professional identity plays an influential function. People who identify strongly with a rewarding career are more likely than others to reap the benefits of a positive work identity (Dutton et al., 2010). Professional identity can also influence an individual's behaviour in the workplace. As professional norms and values can influence work attitudes and mould behaviour, even if a professional identity cannot be a means of earning a living (Bunderson, 2001), it should at least be one's profession or vocation. In other words, one's professional identity as a role identity will provide some degree of behavioural instruction in the workplace (Ibarra, 1999).

2.3 Present professional identity intervention

The portrayal of nursing in the media shapes the current image of the profession and influences the general public attitude towards nursing. Research has found that the media has a major role to play in improving the image. During the SARS epidemic, widespread positive coverage helped to increase public respect for nurses and led to a clearer understanding of their contribution and vital function in the health care system. (Yun et al., 2010). Moreover, a provocative working environment for the nurses themselves can stimulate and urge them to deepen and expand their knowledge and skills through continuous education in order to advocate for themselves, thus increasing their visibility and improving the public image of nurses. Not only that, job rotation, access to professional autonomy, interprofessional learning and peer consultation can help nurses become more visible within their organizations and in society (Hoeve et al., 2014).

Current research indicates that nurses have significantly lower levels of professional identity than other professions, and that professional identity crises are particularly evident among male nursing students. It was found that male nursing students' learning experiences in the lecture and clinical placements influenced their perceptions of the nursing profession, suggesting that professional identity is affected by both personal and social factors. Professional identity also influences their decision to stay or leave the profession (Chen et al., 2020). In this regard, professional development courses can help to enhance their career identity, and the early emergence of foundational ideas about how students decide on their future careers may contribute to their career persistence and future success. Courses should be designed according to the developmental process of

students' professional identity at different levels. For senior students, the focus is on developing independence in their career choices, balancing the benefits of staying in the profession with the risks of leaving. For freshmen, emphasis is placed on reinforcing their professional self-image. For faculty on campus, on enriching their clinical experience. For nursing staff, the priority was to improve their graduation level (Hao et al., 2014).

3 Study Aim, Purpose and Research Question

Aim: To analyse the current situation of the professional identity of male nurses and to propose relevant measures to enhance male involvement in nursing.

Purpose: To reduce gender-based stereotypes and increase the professional identity as well as motivation of male nurses.

Research question: How to improve male nurses' professional identity and increase their proportion?

4 Methodology

4.1 Literature review

As the basis for excellence in quality medical education research, a literature review is a method that contributes to maximising the pertinence, novelty, universality and influence of articles (Maggio et al., 2016). Marshall (2010) defines a literature review as "*a systematic method for identifying, evaluating, and interpreting work produced by researchers, scholars, and practitioners*". The literature review provides the researcher with a background to the research and guides the approach, aiming to maximise creativity and avoid repetition of research while ensuring conformity to professional criteria. It is expected that researchers should make the greatest possible use of staff resources such as librarians and co-workers, search instruments such as databases and search motors as well as existing pertinent articles. (Maggio et al., 2016). At the meanwhile, it is crucial not to simply write down a summary list of each work, but to focus on the whole work as a whole and to stay organized (Knopf, 2006).

Conducting a literature review can have several benefits. It can give an overall view of a body of research with which it is unfamiliar to the researcher. It can help with identifying problems or gaps in existing research. It can reveal what has been done well, avoiding duplication of theory and saving time. It can provide the researcher with new ideas. It allows to place this research in a larger context so that the researcher can illustrate what new conclusions might emerge from the study (Knopf, 2006). Pautasso (2013) listed ten simple rules for writing a literature review (See Table 1).

Table 1. Ten simple rules for writing a literature review (Pautasso, 2013)

Ten simple rules for writing a literature review
1. Define a Topic and Audience *2. Search and Re-search the Literature* *3. Take Notes While Reading* *4. Take Notes While Reading* *5. Keep the Review Focused, but Make It of Broad Interest* *6. Be Critical and Consistent* *7. Find a Logical Structure* *8. Make Use of Feedback* *9. Include Your Own Relevant Research, but Be Objective* *10. Be Up-to-Date, but Do Not Forget Older Studies*

4.2 Literature search

Author 1: The studies included in this review were extracted from two databases, PubMed and CINAHL. Boolean operators "AND" and "OR" were used, as well as the key words "male nurses", "male nursing students", "professional identity", "professional identity development"; abbreviations and synonyms for these terms were also used. Inclusion criteria included published between 2012 and 2022, English language, full text available, and answering or relating to the research question. Excluded were articles that were not in English, not readable in full, and not relevant to the research prior to 2012. An initial search was conducted using PICOS, as shown in Table 2 below.

Table 2. PICOS Criteria (Author 1)

P: Population (participants)	Male nurses OR Male nursing students
I: Phenomena of Interest	Current situation OR Professional identity OR Professional identity development
Co: Context	Worldwide working in a clinical setting OR Studying at school
S: Types of studies	Published between 2012 to date, English language, full text available

The author used a step-by-step process to select articles for inclusion in the review and assigned Hawker scores to the selected articles. This is shown in Figure 1. A total of 262 studies were identified in the PubMed and CINAHL databases after the use of keywords and Boolean operators. 12 studies were found to be duplicates and so were removed. The remaining 250 studies were screened according to their titles and abstracts, from which 26 studies were selected, taking into account their relevance and relevance to the subject of the study. The final 7 studies were selected based on the answers to the research questions (Appendix 1 & Appendix 2).
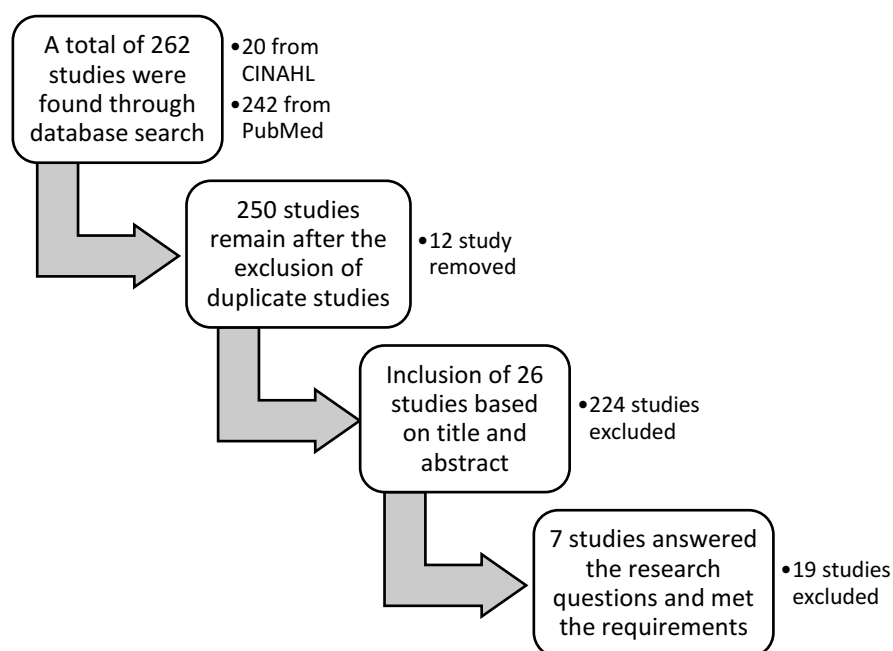

Figure 1. Studies selection process (Author 1)

Author 2: The studies included in this review were extracted from two databases, PubMed and CINAHL. The terms Boolean phrase "AND" and "OR" were used as well as the keywords "nursing", "male nurses", "male nursing students", "professional identity", "professional identification", "gender diversity", "gender identity", "sexism", and other synonyms and similar words for these terms. Screening criteria included English language, full text accessible, published between 2012 and 2022, answering or relating to the research questions. Excluded were articles that were not in English and Chinese, not readable in full, and not relevant to the research prior to 2012. A preliminary search was conducted using PICOS, as shown in Table 3 below.

Table 3. PICOS Criteria (Author 2)

P (Population)	Male nursing students OR Male nurses
I (Interest)	Professional identity OR Professional Identification OR Influencing Factors OR Measures
CO (Context)	Worldwide in schools OR Hospitals OR Health facilities
S (Study design)	English, Chinese, Full text access, Published between 2012 and 2022

The author used the principle of progression from shallow to deep in the analysis. As shown in Figure 2, after using Boolean phrase and keywords, 242 articles were preliminarily screened from PubMed and CINAHL databases, among which 5 articles were repeated and 2 articles did not meet the standard, so they were deleted. The remaining 235 articles were screened according to their titles and abstracts, and 11 articles were selected. 7 articles were finally selected due to considerations of non-availability and relevance to the article in the literature review category (Appendix 3 & Appendix 4).

242 articles
- 233 from PubMEd
- 9 from CINAHL

235 articles remain in reserve
- 7 duplicate or noncompliant criteria were removed

11 articles
- 225 articles were excluded based on title and abstract and article relevance

7 articles
- 4 articles excluded
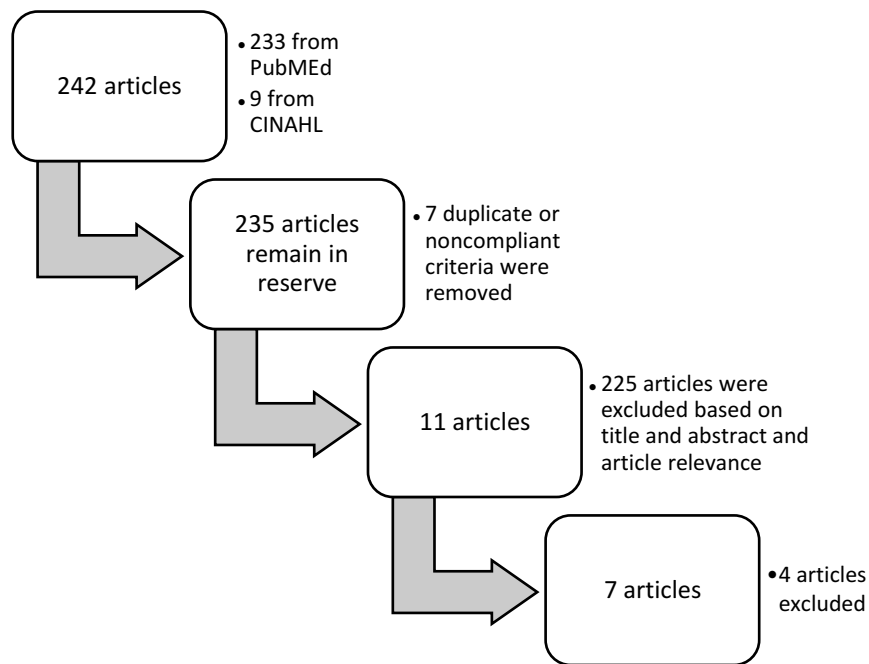
Figure 2. Studies selection process (Author 2)

4.3 Data analysis

Downe-Wamboldt (1992) emphasises that "*Content analysis is a research method that provides a systematic and objective means to make valid inferences from verbal, visual, or written data in order to describe and quantify specific phenomena*". According to Bengtsson's (2016) framework, it consists of the following main stages: decontextualization, recontextualization, categorization and compilation. The content analysis method has the merit of being able to handle vast amounts of textual data and diverse documentary sources which can be used to corroborate evidence, so it is perfectly suited to the diagnosis of multidimensional and sensitive occurrences in nursing (Elo & Kyngäs, 2008). As there was insufficient prior knowledge of the phenomenon and information on this topic was fragmented, the authors used an inductive content analysis approach that moved from the specific to the general.

Author 1: After reading the article, the data was extracted and openly coded in the form of sentences, which were used to describe aspects of the content. These codes will be categorised into higher level headings. Similar sub-categories were grouped into categories, while categories were grouped into major categories. An example of the process can be seen in Figure 3. below.
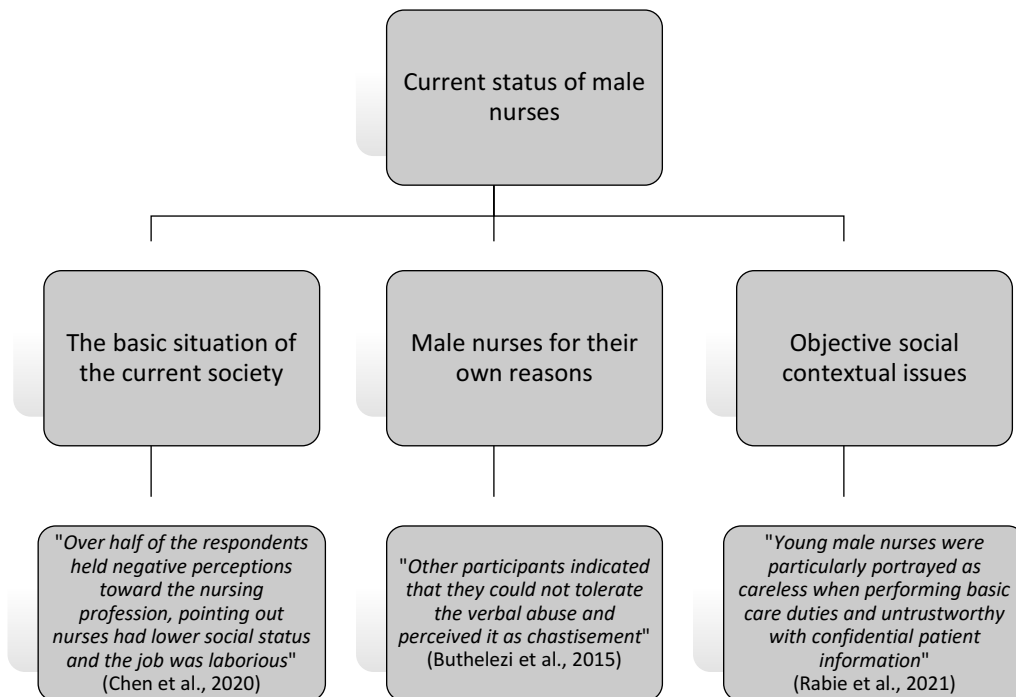
Figure 3. Data analysis process (Author 1)

Author 2: When words, phrases, sentences, etc. have the same meaning, the words can be distilled into fewer content-related categories through content analysis. To extract data from the article, different tags were needed to describe different aspects of the content, placing tags that covered broad content into the upper-level headings. The different tags were then placed in the following subheadings in order according to the content hierarchy. Figure 4 below illustrates this process as an example.
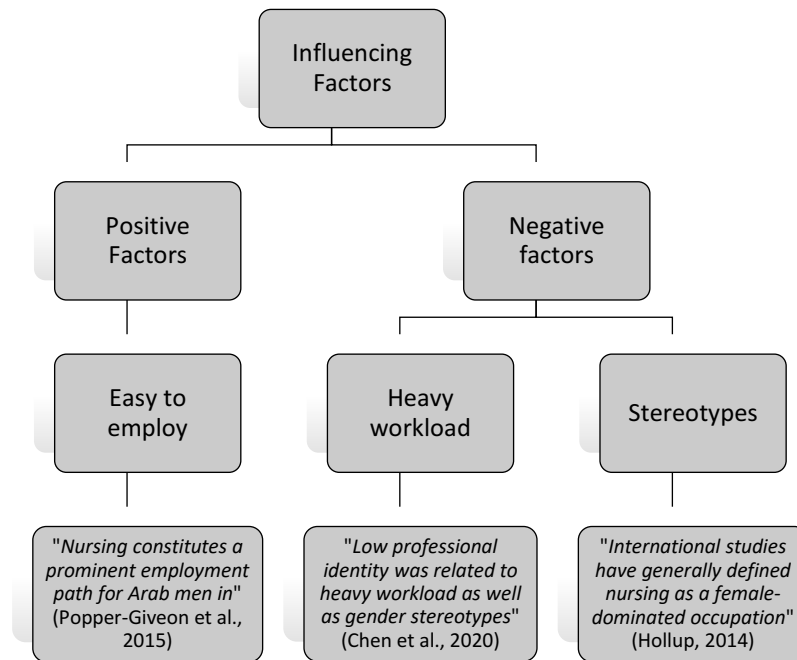
Figure 4. Data analysis process (Author 2)

Author 1 and Author 2 each selected seven articles with the two duplicates removed, resulting in a total of 12 articles selected. They were combined in the analysis of the results.

5 Results

As a result of the analysis, three separate themes on the professional identity of male nurses were defined, based on each of the "Analysis of the current situation" and "Proposed measures". The themes for "Analysis of current situation" are Existing stereotypes, The stress of working in nursing, and Feeling the pressure of the role (see Table 4). The themes for "Proposed measures" are Social guidance and policy, Clinical practice and education and Education in schools (see Table 5). These themes represent factors that affect the professional identity of male nurses, including male nursing students, and measures to improve their professional identity.

Table 4. Analysis of the current situation regarding the professional identity of male nurses

Themes	Subthemes
Existing stereotypes	- Social opinion and prejudice against nursing - The influence of cultural beliefs - Lack of professional recognition of male nurses
The stress of working in nursing	- Mismatch between workload and wages - Male nurses are marginalized - Few opportunities for promotion
Feeling the pressure of the role	- Decreased sense of self-worth - Life interpersonal relationships are affected - Physical and mental health is compromised

Table 5. Measures to enhance the professional identity of male nurses

Themes	Subthemes
Social guidance and policy	- Comprehensive public education - Encourage media campaigns - Better recruitment and remuneration
Clinical practice and education	- Internal encouragement to understand male nurses - Genderless assignment of operational tasks - Appropriately direct male nursing students to provide care
Education in schools	- Recognise the potential impact of career advisors and mentors in secondary schools - More support for students from nursing educators - High-profile male caregivers as role models - Provide opportunities and share experiences for potential applicants

5.1 Analysis of the current situation regarding the professional identity of male nurses

5.1.1 Existing stereotypes

Social opinion and prejudice against nursing

The word "nursing" can be associated with breastfeeding babies, an activity that has been closely associated with "women's work" for over a century (Stanley et al., 2016). While gender inequalities have narrowed in other professions, for example medical, legal and commercial, nursing remains a predominantly female profession in which men remain underrepresented. In the Eastern world, nursing is traditionally considered to be a female domain, whereas men are considered to be the breadwinners of the family and perform paid work external the home (Mao et al., 2021).

In the public mind, nursing is deeply perceived as a female profession and this perception is also reflected in the media (Popper-Giveon et al., 2015). The distorted image of nursing in the media influences public perceptions. Not just the media, but also school counsellors, and even the entire school to education system, fail to raise awareness among students and present nursing as a gender-neutral profession (Valizadeh et al., 2014). The general perception of gender may lead to more women than men being happy to learn and stay in nursing, which would also act as a barrier for men to enter the profession (Arreciado Marañón et al., 2019).

Nurses are ascribed to having image traits such as modesty, gentleness, submissiveness and empathy, in contrast to masculine traits such as initiative and dominance, which are not appropriate for the nursing profession. This stereotype puts pressure on men when deciding to join or stay in the nursing profession (Mao et al., 2021). Whereas men for whom wanting to be a "real nurse" must confront questions regarding their masculinity and/or sexuality (Yang et al., 2017). In their study, Stanley et al. (2016) stated that societal misconceptions about nursing being "unsuitable" for men, along with assumptions about the consequences of male career choices, are often associated with gender stereotypes. The role of the media in perpetuating these misconceptions was also confirmed by male nurse respondents in this study. Nursing is portrayed by the media as a more female-friendly profession, forcing male nurses to be depicted as "gay" and making nursing a profes-

sion that is not actively chosen by men. This view is simultaneously widely accepted by the public (Stanley et al., 2016).

The influence of cultural beliefs

Non-sexist patient care is one of the ethical obligations of nurses. The challenges for male nurses in clinical settings are numerous, for instance facing religious culture and organisational challenges when providing non-discriminatory patient care (Hollup, 2014). It has a negative impact, especially on the quality of care and the satisfaction of female patients. More than this, these problems create a tense working environment for male nurses.

For example, culture plays an important role in South African communities. A pregnant Xhosa interviewee reported that "*We Xhosa women are not used to undressing in front of men*". This finding confirms why men, especially black students, are concerned about seeing women's intimate body parts (Buthelezi et al., 2015). In Mauritius, male nurses are perceived to be more likely to make sexual overtures to female patients, hence the separation of male and female patients. This is not only motivated by political interests, but also by the racial and religious diversity of the population with its cultural traditions and values, which is linked to the local Kreol term "attouchement sexuelle" (sexual contact) (Hollup, 2014).

Lack of professional recognition of male nurses

The feminisation of nursing stems from Nightingale's conviction that men are inappropriate for nursing. Young women, on the other hand, especially those of excellent character and high social status, are automatically suited to nursing (Popper-Giveon et al., 2015). Even today, society still regards nursing to be a non-male profession, and these perceptions influence the way patients and other workers view male nurses in clinical settings (Yang et al., 2017). In the Arreciado Marañón's study (2019), according to the respondents, gender stereotypes resulted in different expectations for male and female nurses. These low expectations contributed to the more limited ability of male nurses to build relationships. It is this external disapproval of the presence of male nurses in the nursing profession that allows inequalities to occur.

Almost all male nurses have experienced rejection by female patients who do not believe that they can offer the same level of care measures as female nurses who show a preference for female nurses (Buthelezi et al., 2015). Young male nurses in particular were described as careless and untrustworthy of confidential patient information when performing basic nursing duties (Rabie et al., 2021). Not only does this affect their image, it also limits the chances of male nursing students being able to exercise their nursing skills and become qualified nurses (Buthelezi et al., 2015).

5.1.2 The stress of working in nursing

Mismatch between workload and wages

Several studies have shown that the perception of nurses about their work is impacted by their caseload. On the other hand, salary is an extrinsic factor that indirectly contributes to nurses' personal goals and leads tangentially to a sense of achievement. The monthly income of male nurses is one of the demographic factors that influence burnout. Being prone to burnout due to lower monthly salaries reduces male nursing students' professional identity and affects their enthusiasm for a long-term career in nursing (Lyu et al., 2022). The survey showed that when men were questioned about their reasons for quitting the nursing sector, the most common option that was chosen by the majority of male respondents was low salary (Stanley et al., 2016). Correspondingly, young nurses are being more involved in duplicative work, are receiving lower wages and less opportunity to participate in decision-making (Stanley et al., 2016).

Moreover, more than half of the respondents had a negative view of the nursing profession, noting that nurses have a low social status and work incredibly hard. As well, male nursing students pointed out that the main reasons they disliked the nursing profession or career were intense courses, stress and irregular working hours (Chen et al., 2020).

Male nurses are marginalized

Marginalisation includes two main aspects, namely the feeling of being an outsider both internally and in the provision of care. In group tasks, because of the numerical advantage of female students, they initiate the discussion and are not visible to male students. The male students may

have a right to speak, but the female students decide the direction of the discussion (Mao et al., 2021) which the male students felt was an intruder in the nursing profession. With their minority gender position in the nursing field, male nurses also have some particular challenges like being bullied by co-workers and fellow health professionals (Stanley et al., 2016). Sometimes, male nurses are not even provided with professional clothing, as uniform suppliers only offer female clothing (Rabie et al., 2021).

It has even been said that the very label "male nurse" carries a stereotype that further marginalises this extreme few in the nursing profession. Male nurses are seen as more prone to engage in sexual propositions with female patients. And allegations of sexual contact are a serious offence that can result in nursing staff being fired and losing their jobs. One senior female health manager said: "*Families and relatives don't want to see a male nurse doing an echocardiogram on a female patient. They would see it as a form of sexual abuse*" (Hollup, 2014).

Few opportunities for promotion

In Rabie's study (2021), it was mentioned that there was a lack of mentoring of junior male nurses by senior male nurses because management did not have senior male nurses. Also, another barrier that male nurses may encounter is the limited number of clinical departments in which they can be employed (Mao et al., 2021). In some countries and regions, male nurses are not placed in paediatrics or gynaecology due to gender stereotypes and the influence of cultural background. Male nursing students are not even allowed to do rotational studies. Interviewees indicated that they experienced verbal abuse, especially from female patients. This may prevent them from participating in the full range of nursing practice activities (Buthelezi et al., 2015).

5.1.3   Feeling the pressure of the role

Decreased sense of self-worth

Such preconceived ideas about who is suitable for certain professions that exist in the nursing profession can lead to negative behaviours, perceptions and emotional experiences of male nurses since they are not female (Rabie et al., 2021). Public stereotypes about the nursing profession

make it difficult for male nurses to maintain a motivated attitude towards pursuing a career in nursing (Valizadeh et al., 2014).

When male nursing students are subjected to discrimination and treated poorly in the classroom and on clinical placements, they feel self-conscious, alienated or irritated. They expressed an inability to tolerate verbal abuse, viewing it as a form of chastisement and likening it to: being shouted at like a child (Buthelezi et al., 2015). Other participants mentioned that they seemed overly sensitive and generally upset when they were reprimanded by female nurses (Rabie et al., 2021). Certain male nurses noted that colleagues sometimes undermined their instructions due to negative stereotypes, affecting their self-confidence and leading to fatigue because of their gender (Rabie et al., 2021). It can be concluded that the bullying and negative comments that male nurses receive in clinical settings can have a negative impact on their confidence (Buthelezi et al., 2015).

Similarly, some female patients may reject their care because they are male resulting in feelings of rejection and mistrust. They feel unaccepted by their patients, which leads to self-doubt. This can be an emotional situation faced by male nursing students (Buthelezi et al., 2015).

Life interpersonal relationships are affected

The behaviour of male nurses in family life may be influenced by experiencing role pressures that may result from discrimination, and internal role conflict may even occur. This can occur when there are conflicting pressures to conform to a particular role in the work and home spheres. As a result, the roles fulfilled at work are often the opposite, which makes it more difficult to fulfil a role at home (Rabie et al., 2021). The majority of respondents in Chen's study (2020) reported that they had been ridiculed and discriminated against with fear that these stereotypes would have a negative impact on their marriage prospects. And due to the nature of their work, there was little personal time for socialising and dating.

Similarly, almost all male nursing students encounter some embarrassment in their daily social life. While most of the time they manage to keep themselves out of this situation, it does not seem to change anything. People often give them "strange looks" or respond loudly with "what?" when they tell them they are in the nursing profession or fit in as a nurse. They are sometimes ques-

tioned as to whether "men in nursing tend to be effeminate or gay?", and some even suspect that their reason for participating in nursing courses is to find girls (Yang et al., 2017).

Physical and mental health is compromised

The biggest issue in the nursing profession is physical, mental and emotional fatigue, which causes a certain amount of stress. Stress among nurses can lead to job dissatisfaction and burnout, negatively impacting their nursing behaviour and the quality of health and clinical services they provide to patients. Not only that, but the increased stress faced by male nurses makes them more susceptible to health-related problems and has the potential to seriously affect their well-being. Emotional effects include frustration, irritability and happiness (Rabie et al., 2021). In Rabie's study (2021), male nurses reported feeling depressed due to their depressed emotions. They also felt a lack of motivation, anger and anxiety.

5.2   Measures to enhance the professional identity of male nurses

5.2.1   Social guidance and policy

Comprehensive public education is the first priority for improving gender stereotypes. The media plays a major role in shaping the image of male nurses. Encourage the media to demonstrate the professional perspectives of male and female nurses and highlight their knowledge and skills (Valizadeh et al., 2014). In order to enhance the positive portrayal of male nurses and enable them to make a positive contribution to the professional development of the nursing area, actively maintaining or promoting positive perceptions developed through the popular media can be one of the potent ways.

Not only that, but nursing should be given the same status, wages and benefits as other scientific and technical professions. Traditionally, men are the breadwinners of their families, so increasing the average income level of male nurses is a strong factor in improving their professional identity (Mao et al., 2021) can go some way to reducing the loss of male nurses. Overall, adequate remuneration and agreeable working conditions, mobility with opportunities for both individual and occupational development must be the basis for recruitment and retention.

5.2.2 Clinical practice and education

Above all, the management of health care institutions should make a real effort to support male nurses, a minority group in the nursing profession. Help can be provided through in-service training and public discussion among staff. When this support is cascaded to the whole workforce, they will understand the predicament of male nurses (Rabie et al., 2021). Apart from this, there is also a positive association between the students and their clinical supervisors that can have a beneficial effect on the male nursing students' selves (Buthelezi et al., 2015).

Additionally, male nursing students should not be assigned tasks based on gender and nursing education should not be influenced by gender stereotypes. Men should be allowed to participate in all nursing engagements that relate to learning goals which must be fulfilled. There should be no gender-based division of labour that needs to be recognised, as male and female student nurses require the same treatment in terms of professional expertise skills (Rabie et al., 2021). Tasks and shifts should be reasonably divided by the hospital (Chen et al., 2020).

It has to be said that cultural background is a real and present problem encountered by male nurses due to certain religious and cultural practices. However, men should be guided properly in delivering nursing care to patients, especially women patients. To overcome situations that hinder their adequate involvement in their caring, it is important that they feel supported by other staff in the clinical environment (Buthelezi et al., 2015).

5.2.3 Education in schools

At the secondary school level, career advisors and guidance counselors have a huge potential impact on students' career choices. Greater efforts should be made to provide gender-neutral messages to schools. Educate students on the reality of the role of nurses and support the qualifications nurses hold and the role they play in the health system (Mao et al., 2021) and promote nursing as an aspirational career image in the minds of students.

In academic studies, male nursing students may encounter obstacles. Nursing educators should provide more support to students and be receptive to their views on teaching methods so that educational placements are more likely to be acceptable to students of both sexes (Mao et al.,

2021). Designing individualised curricula and programmes can support the ongoing development of professional identities for gender diverse nursing students (Chen et al., 2020). At the same time, the opportunities for learning are equally distributed to students, regardless of their gender (Buthelezi et al., 2015). It is also worth mentioning that the role models set by teachers, the supportive guidance and the ongoing training programmes they provide are also significant in enhancing the professional identity of male nurses (Chen et al., 2020).

The status quo of a women-dominated nursing career ought not to make men feel that they are not part of this profession. More capable male professional nurses are expected to spearhead efforts to inspire young male nurses (Buthelezi et al., 2015). With male nurses visiting and presenting in schools (Stanley et al., 2016), their narratives can easily be commissioned and used as positive examples of men in the nursing field. Furthermore, nursing courses taught by male nurses help to shape the professional identity of male nursing students (Chen et al., 2020).

In addition to this, giving male nursing students and male nurses the opportunity to discuss challenges and concerns, and the chance to share their experiences and coping strategies (Buthelezi et al., 2015), can get them tangibly involved in making changes to their profession. In Chen's study (2020), it was shown that people who attended courses or activities at schools or hospitals that were specifically designed for men had a better professional identity. Thus, measures such as nursing-related courses, lectures or activities aimed at men showed active feedback in terms of enhancing their professional identity. Other studies have shown that there are many effective measures to change men's perceptions of the nursing profession, including but not limited to through clinical observations, internships and special activities organised for men, such as seminars, salons or speech competitions.

6 Discussion

By reviewing the literature data and summarising the information in the literature, this literature review has managed to identify three main factors that influence the professional identity of male nurses and three main types of existing measures to enhance the professional identity of male nurses. The main influencing factors are existing stereotypes, the stress of working in nursing and feeling the pressure of the role. The main existing measures of enhancement are social guidance and policy, clinical practice and education and education in schools.

6.1 Analysis of the current situation regarding the professional identity of male nurses

The authors of this thesis found that the prejudice of social opinion towards nursing greatly influenced the professional identity of male nurses. This was a similar theme found in a previous study by Zamanzadeh et al. (2013), where male nurses felt embarrassed and reluctant to acknowledge their profession by performing work that was perceived as feminine. Also in line with this thesis - the view that male nurses face religious cultural and organisational challenges in clinical settings - is reflected in Banakhar et al.'s (2021) study, where male nurses were not allowed to provide care to female patients and were unable to undertake clinical rotations in obstetric and paediatric wards. Conversely, in Keogh & O'Lynn's (2007) study, it was found that the presence of male nurses was viewed with disapproval by nursing stakeholders and that male nurses were often prevented from participating in the full range of nursing interventions with patients of the opposite sex by female nursing staff. This is in contrast to the authors of this thesis who found that female patients were the subject population that lacked recognition of male nurses.

In terms of work stress, the study by Cheng et al. (2018) arrived at a similar view to that of the authors of this thesis, namely the mismatch between pay and workload for male nurses. In contrast, Juliff et al. (2016) raised the theme of male nurses being marginalised in terms of clinical aspects, i.e. marginalisation of patient allocation. This provided new ideas for the authors of this thesis. Abushaikha et al. (2014) added the information that future employment opportunities for male nurses are restricted, in that current admissions policies and hospital clinical training policies are more favourable to female students, something that the authors of this thesis did not find.

Chan et al.'s 2014 study presented ideas that are similar to the authors of this thesis regarding male nurses' sense of professional identity in relation to their sense of self-worth. They concluded that because male nurses were unclear about their role, this resulted in low self-esteem and low professional identity, which had a negative impact on their self-perceptions, job performance and future career decisions. On the aspects of male nurses' interpersonal relationships along with their physical and mental health that are affected as presented in this paper, MacWilliams (2013) added the following aspects. Family members of male nurses felt incomprehensible and even unsupportive of male nurses' career choices. And due to isolation and marginalisation, male nursing students may remain in a state of tension and helplessness.

6.2   Measures to enhance the professional identity of male nurses

Similar to what the authors of this thesis found about improving the professional image of male nurses through comprehensive public education, Kearns & Mahon (2021) raised the expectation of challenging stereotypes by enabling patients and the public to grasp the complexity of nursing work, thereby promoting professional acceptance. Notably, Santos & Miguel (2020) proposed an idea not addressed by the authors of this thesis. They argued that volunteering experiences can also influence male nurses' perceptions of nursing and their career decisions to enter the nursing workforce. These experiences can enhance male nurses' sense of belonging in the nursing and social care field.

Concerning the rational division of tasks and shifts in hospitals mentioned by the authors of this thesis, Shin & Lim (2021) added that managers should do a good job of staff deployment. Decisions should be made to rationalise the workload according to the work capacity of male and female nurses so that they can work with each other to complete their work efficiently and at a high-quality level. Alongside what the authors of this thesis found in providing help and guidance to male nurses, Kieft et al. (2014) proposed a new concept of creating harmonious interpersonal relationships and a healthy working environment for nursing staff. This not only achieves organisational goals, but also provides personal satisfaction from the work.

On the education side of schools, beyond the measures proposed by the authors of this thesis to recognise the potential impact of career advisors and mentors in secondary schools, Whitford et al. (2018) emphasised that gender-neutral images and language should be used as early as possible to introduce health and wellness topics. In the same vein, the authors of this thesis agreed with Whitford et al. (2018) in terms of having high-profile male caregivers as role models. Providing examples of advocacy at school and professional events can allow male nursing students to find emotional resonance and goals to strive for. Finally, Whitford et al. (2018) also recommended providing potential applicants with the option to experience nursing in action by auditioning them prior to applying. This is the part of the thesis that the authors did not cover.

7 Critical evaluation, Ethical considerations and Limitations

Hawker et al.'s (2002) assessment instrument was used to evaluate the credibility and quality of the essays in this literature review. The instrument assessed the below aspects of the articles selected for review: *Title and Abstract, Introduction and Aims, Methods and Data, Sampling, Data Analysis, Ethics and Bias, Results, Transferability or Generalizability, Implications and Usefulness*, on a scale of 1 to 4 (1 is the lowest and 4 is the highest) with a total of 36 data points (4*9). The minimum requirement for articles to be included in this review is 30 points. In the selection of articles by Author 1, the lowest article score was 33 and the highest quality article score was 35, with an average assessment score of 34 for the seven articles selected, see Appendix 1. Author 2 was selected with a minimum article score of 33 and a maximum score of 35, with an average assessment score of approximately 34.14 for the seven articles selected, see Appendix 3. With the critique and assessment of the tool, the final articles selected could be used to inform the synthesis and interpretation of the study findings.

For all articles used, the authors acknowledge the ethical concerns of their studies and/or refer to the approval of various ethics committees. Prior to conducting the interviews, participants were informed of the explanation of the study objectives, they all provided informed consent for voluntary participation and allowed the interview to be recorded. All participants were informed that they had the right to withdraw from the interview with no penalty from any stage. Interviews were conducted in private rooms where participants were guaranteed privacy, confidentiality and the autonomy to express their opinions openly. All information presented in this review has been correctly cited from the primary sources and full attribution has been given to the respective authors. The citation format is based on the latest parameters of the American Psychological Association and gives full recognition to the authors involved (APA, 7th edition).

The articles selected for this literature review were limited to those that were freely available to JAMK students in English or had free public access. The sample of articles selected was not comprehensive due to the fact that male nurses, the subject of this literature review, are a minority internationally for which there is also a deep public stereotype and incomplete understanding of male nurses. Moreover, this is a constant historical issue, with a large time span and sample data changing from year to year, allowing for the possibility that errors exist. Although the authors supported the study by reading as much data as possible from the literature that was consistent with

the subject matter and less removed from the current year, errors were to some extent inevitable. In further research, a more demographically focused approach would be beneficial in obtaining more relevant and inferable results.

8 Conclusion and recommendations for further studies

Regardless of the changing needs for nursing professionals in healthcare, gender has never been a measure of quality of care.

A host of studies have shown that male nurses leave the nursing profession prematurely at a much greater rate than female nurses. Hence, there is an urgent need to improve the professional identity and sense of belonging of male nurses to help address the present crisis of gender imbalance and staff shortages in the nursing profession.

Generally speaking, men often encounter prejudice and differential treatment when entering the nursing sector. For male nurses with aspirations, ambitions and goals, the main negative influence on their path to a rewarding profession is stereotyping. With the systematic trend towards the marginalisation of men in the nursing field, it means that it is difficult for men to be genuinely embraced in the nursing field from the heart. This is reflected in the growth of the profession with increased gender imbalance and shortages of nursing staff.

In response to these issues, society should strive to portray male nurses in a positive manner through various means, such as the media, in an effort to break down gender stereotypes. Educators should instil the right attitudes in children from an early age. Male nursing students and male nurses should also be treated equally in their studies and work. Colleagues and superiors can also care for and guide male nurses and male nursing students in their work and life, helping them to overcome professional difficulties and reduce work pressure. In turn, male nursing workers themselves should work hard, enrich their knowledge, prove their abilities through their actions and improve the image and perception of male nursing. This applies not only to the nursing profession, but also to other professions that are affected by stereotypes.

References

Abushaikha, L., Mahadeen, A., AbdelKader, R., & Nabolsi, M. (2014). Academic challenges and positive

aspects: Perceptions of male nursing students. *International Nursing Review*, *61*(2), 263–269.

https://doi.org/10.1111/inr.12098

Achora, S. (2016). Conflicting image: Experience of male nurses in a Uganda's hospital. *International*

Journal of Africa Nursing Sciences, *5*, 24–28. https://doi.org/10.1016/j.ijans.2016.10.001

Arif, S., & Khokhar, S. (2017). A historical glance: Challenges for male nurses. *JPMA. The Journal of the*

Pakistan Medical Association, *67*(12), 1889–1894.

Arreciado Marañón, A., Rodríguez-Martín, D., & Galbany-Estragués, P. (2019). Male nurses' views of

gender in the nurse-family relationship in paediatric care. *International Nursing Review*, *66*(4),

563–570. https://doi.org/10.1111/inr.12541

Ashforth, B. E., & Mael, F. (1989). Social Identity Theory and the Organization. *The Academy of*

Management Review, *14*(1), 20–39. https://doi.org/10.2307/258189

Assarroudi, A., Heshmati Nabavi, F., Armat, M. R., Ebadi, A., & Vaismoradi, M. (2018). Directed

qualitative content analysis: The description and elaboration of its underpinning methods and data

analysis process. *Journal of Research in Nursing*, *23*(1), 42–55.

https://doi.org/10.1177/1744987117741667

Banakhar, M., Bamohrez, M., Alhaddad, R., Youldash, R., Alyafee, R., Sabr, S., Sharif, L., Mahsoon, A., &

Alasmee, N. (2021). The Journey of Saudi Male Nurses Studying within the Nursing Profession: A

Qualitative Study. *Nursing Reports*, *11*(4), 832–846. https://doi.org/10.3390/nursrep11040078

Barrett-Landau, S., & Henle, S. (2014). Men in Nursing: Their Influence in a Female Dominated Career. *Journal for Leadership and Instruction*, *13*(2), 10–13.

Bell-Scriber, M. J. (2008). Warming the nursing education climate for traditional-age learners who are male. *Nursing Education Perspectives*, *29*(3), 143–150.

Bengtsson, M. (2016). How to plan and perform a qualitative study using content analysis. *NursingPlus Open*, *2*, 8–14. https://doi.org/10.1016/j.npls.2016.01.001

Bodilenyane, K., & Motshegwa, B. (2012). Nurses Perception Of Their Workload And Pay In The Era Of HIV/AIDS In Gaborone And The Surrounding Areas Of Botswana. *International Journal of Human Resource Studies*, *2*(1), 188. https://doi.org/10.5296/ijhrs.v2i1.1440

Brennan, C. (2020). Tracing the History of the Nurse Practitioner Profession in 2020, the Year of the Nurse. *Journal of Pediatric Health Care*, *34*(2), 83–84. https://doi.org/10.1016/j.pedhc.2019.12.005

Brody, A. A., Farley, J. E., Gillespie, G. L., Hickman, R., Hodges, E. A., Lyder, C., Palazzo, S. J., Ruppar, T., Schiavenato, M., & Pesut, D. J. (2017). Diversity dynamics: The experience of male Robert Wood Johnson Foundation nurse faculty scholars. *Nursing Outlook*, *65*(3), 278–288. https://doi.org/10.1016/j.outlook.2017.02.004

Bunderson, J. S. (2001). How work ideologies shape the psychological contracts of professional employees: Doctor's responses to perceived breach. *Journal of Organizational Behavior*, *22*(7), 717–741. https://doi.org/10.1002/job.112

Buthelezi, S. F., Fakude, L. P., Martin, P. D., & Daniels, F. M. (2015). Clinical learning experiences of male

    nursing students in a Bachelor of Nursing programme: Strategies to overcome challenges. *Cura-*

    tionis, *38*(2), 7. https://doi.org/10.4102/curationis.v38i2.1517

Caza, B. B., & Creary, S. (2016). The construction of professional identity. *Perspectives on Contemporary*

    Professional Work.

    https://www.elgaronline.com/view/edcoll/9781783475575/9781783475575.00022.xml

Chan, Z. C. Y., Lo, K. K. L., Tse, K. C. Y., & Wong, W. W. (2014). Self-Image of Male Nursing Students in

    Hong Kong: Multi-Qualitative Approaches. *American Journal of Men's Health*, *8*(1), 26–34.

    https://doi.org/10.1177/1557988313488929

Chen, Y., Zhang, Y., & Jin, R. (2020). Professional Identity of Male Nursing Students in 3-Year Colleges

    and Junior Male Nurses in China. *American Journal of Men's Health*, *14*(4), 1557988320936583.

    https://doi.org/10.1177/1557988320936583

Cheng, M.-L., Tseng, Y.-H., Hodges, E., & Chou, F.-H. (2018). Lived Experiences of Novice Male Nurses in

    Taiwan. *Journal of Transcultural Nursing*, *29*(1), 46–53.

    https://doi.org/10.1177/1043659616676318

de Oliveira, D. R., Griep, R. H., Portela, L. F., & Rotenberg, L. (2017). Intention to leave profession,

    psychosocial environment and self-rated health among registered nurses from large hospitals in

    Brazil: A cross-sectional study. *BMC Health Services Research*, *17*, 21.

    https://doi.org/10.1186/s12913-016-1949-6

Downe-Wamboldt, B. (1992). Content analysis: Method, applications, and issues. *Health Care for Women International*, *13*(3), 313–321. https://doi.org/10.1080/07399339209516006

Dutton, J. E., Roberts, L. M., & Bednar, J. (2010). Pathways for Positive Identity Construction at Work: Four Types of Positive Identity and the Building of Social Resources. *Academy of Management Review*, *35*(2), 265–293. https://doi.org/10.5465/amr.35.2.zok265

Elo, S., & Kyngäs, H. (2008). The qualitative content analysis process. *Journal of Advanced Nursing*, *62*(1), 107–115. https://doi.org/10.1111/j.1365-2648.2007.04569.x

Ervin, L. H., & Stryker, S. (2001). Theorizing the Relationship Between Self-Esteem and Identity. In N. Goodman, S. Stryker, & T. J. Owens (Eds.), *Extending Self-Esteem Theory and Research: Sociological and Psychological Currents* (pp. 29–55). Cambridge University Press. https://doi.org/10.1017/CBO9780511527739.003

Goltz, H. H., & Smith, M. L. (2014). Forming and Developing Your Professional Identity: Easy as PI. *Health Promotion Practice*, *15*(6), 785–789. https://doi.org/10.1177/1524839914541279

Haigh, M. (2015). *Men in nursing: A quantitative study from the perspective of West Australian nursing students* [Master's Thesis, School of Population and Global Health]. https://research-repository.uwa.edu.au/en/publications/men-in-nursing-a-quantitative-study-from-the-perspective-of-west-

Hao, Y.-F., Niu, H.-J., Li, L.-P., Yue, S.-J., & Liu, X.-H. (2014). Measurement of professional identity in Chinese nursing students. *International Journal of Nursing Sciences*, *1*(2), 137–144. https://doi.org/10.1016/j.ijnss.2014.05.002

Hawker, S., Payne, S., Kerr, C., Hardey, M., & Powell, J. (2002). Appraising the evidence: Reviewing

disparate data systematically. *Qualitative Health Research*, *12*(9), 1284–1299.

https://doi.org/10.1177/1049732302238251

Hoeve, Y. ten, Jansen, G., & Roodbol, P. (2014). The nursing profession: Public image, self-concept and

professional identity. A discussion paper. *Journal of Advanced Nursing*, *70*(2), 295–309.

https://doi.org/10.1111/jan.12177

Hollup, O. (2014). The impact of gender, culture, and sexuality on Mauritian nursing: Nursing as a non-

gendered occupational identity or masculine field? Qualitative study. *International Journal of Nurs-

ing Studies*, *51*(5), 752–760. https://doi.org/10.1016/j.ijnurstu.2013.09.013

Ibarra, H. (1999). Provisional Selves: Experimenting with Image and Identity in Professional Adaptation.

Administrative Science Quarterly, *44*(4), 764–791. https://doi.org/10.2307/2667055

Jayapal, S. K., & Arulappan, J. (2020). Historical Trajectory of Men in Nursing in India. *SAGE Open

Nursing*, *6*, 2377960820920128. https://doi.org/10.1177/2377960820920128

Juliff, D., Russell, K., & Bulsara, C. (2016). Male or nurse what comes first? Challenges men face on their

journey to nurse registration. *Australian Journal of Advanced Nursing*, *34*(2), 45–52.

Kearns, T., & Mahon, P. (2021). How to attain gender equality in nursing—An essay. *BMJ*, *373*, n1232.

https://doi.org/10.1136/bmj.n1232

Keogh, B., & O'Lynn, C. (2007). Male Nurses' Experiences of Gender Barriers: Irish and American

   Perspectives. *Nurse Educator*, *32*(6), 256–259.

   https://doi.org/10.1097/01.NNE.0000299478.64809.82

Kieft, R. A., de Brouwer, B. B., Francke, A. L., & Delnoij, D. M. (2014). How nurses and their work

   environment affect patient experiences of the quality of care: A qualitative study. *BMC Health Ser-*

   vices Research, *14*, 249. https://doi.org/10.1186/1472-6963-14-249

Kim, I.-J., Kim, S.-H., & Sohn, S.-K. (2017). Societal perceptions of male nurses in South Korea: A Q-

   methodological study. *Japan Journal of Nursing Science: JJNS*, *14*(3), 219–230.

   https://doi.org/10.1111/jjns.12152

Knopf, J. W. (2006). Doing a Literature Review. *PS: Political Science & Politics*, *39*(1), 127–132.

   https://doi.org/10.1017/S1049096506060264

Lyu, X., Akkadechanunt, T., Soivong, P., & Juntasopeepun, P. (2022). Factors influencing intention to

   stay of male nurses: A descriptive predictive study. *Nursing & Health Sciences*.

   https://doi.org/10.1111/nhs.12928

Mackintosh, C. (1997). A historical study of men in nursing. *Journal of Advanced Nursing*, *26*(2), 232–

   236. https://doi.org/10.1046/j.1365-2648.1997.1997026232.x

MacWilliams B. R., Schmidt B., & Bleich M. R. (2013). Men in Nursing. *AJN The American Journal of*

   Nursing, *113*(1), 38. https://doi.org/10.1097/01.NAJ.0000425746.83731.16

Maggio, L. A., Sewell, J. L., & Artino, A. R. (2016). The Literature Review: A Foundation for High-Quality Medical Education Research. *Journal of Graduate Medical Education*, *8*(3), 297–303. https://doi.org/10.4300/JGME-D-16-00175.1

Mao, A., Cheong, P. L., Van, I. K., & Tam, H. L. (2021). "I am called girl, but that doesn't matter" - perspectives of male nurses regarding gender-related advantages and disadvantages in professional development. *BMC Nursing*, *20*(1), 24. https://doi.org/10.1186/s12912-021-00539-w

Mao, A., Wang, J., Zhang, Y., Cheong, P. L., Van, I. K., & Tam, H. L. (2020). Factors influencing recruitment and retention of male nurses in Macau and mainland China: A collaborative, qualitative study. *BMC Nursing*, *19*(1), 104. https://doi.org/10.1186/s12912-020-00497-9

Marshall, G. (2010). Writing… A literature review. *Synergy*, 20–23.

Matthews, J., Bialocerkowski, A., & Molineux, M. (2019). Professional identity measures for student health professionals – a systematic review of psychometric properties. *BMC Medical Education*, *19*(1), 308. https://doi.org/10.1186/s12909-019-1660-5

Matthews, S. (2001). Registered male: A discussion on men in the nursing profession. *Contemporary Nurse*, *11*(2–3), 231–235. https://doi.org/10.5172/conu.11.2-3.231

Maymoun, N., & Sohail, M. S. (2020). Who Wants To Be a Nurse? Understanding Emirati Female Students' Knowledge and Attitudes About Nursing as a Career. *Nursing Education Perspectives*, *41*(3), E14–E19. https://doi.org/10.1097/01.NEP.0000000000000659

Pautasso, M. (2013). Ten Simple Rules for Writing a Literature Review. *PLoS Computational Biology*, *9*(7), e1003149. https://doi.org/10.1371/journal.pcbi.1003149

Popper-Giveon, A., Keshet, Y., & Liberman, I. (2015). Increasing gender and ethnic diversity in the health care workforce: The case of Arab male nurses in Israel. *Nursing Outlook*, *63*(6), 680–690. https://doi.org/10.1016/j.outlook.2015.08.001

Quinn-Szcesuil, J., Wojciechowski, M., Appelman, H., Miller, S., Turner, J., & Lampert, L. (2013, March 30). *Structural Inequality and Diversity in Nursing*. Minority Nurse. https://minoritynurse.com/structural-inequality-and-diversity-in-nursing/

Rabie, T., Rossouw, L., & Machobane, B. F. (2021). Exploring occupational gender-role stereotypes of male nurses: A South African study. *International Journal of Nursing Practice*, *27*(3), e12890. https://doi.org/10.1111/ijn.12890

Rees, C. E., & Monrouxe, L. V. (2018). Who are you and who do you want to be? Key considerations in developing professional identities in medicine. *Medical Journal of Australia*, *209*(5). https://www.mja.com.au/journal/2018/209/5/who-are-you-and-who-do-you-want-be-key-considerations-developing-professional

Santos, D., & Miguel, L. (2020). Male Nursing Practitioners and Nursing Educators: The Relationship between Childhood Experience, Social Stigma, and Social Bias. *International Journal of Environmental Research and Public Health*, *17*(14), 4959. https://doi.org/10.3390/ijerph17144959

Sasa, R. I. (2019). Male nurse: A concept analysis. *Nursing Forum*, *54*(4), 593–600. https://doi.org/10.1111/nuf.12374

Shin, S.-Y., & Lim, E.-J. (2021). Clinical Work and Life of Mid-Career Male Nurses: A Qualitative Study.

International Journal of Environmental Research and Public Health, *18*(12), 6224.

https://doi.org/10.3390/ijerph18126224

Stanley, D., Beament, T., Falconer, D., Haigh, M., Saunders, R., Stanley, K., Wall, P., & Nielson, S. (2016).

The male of the species: A profile of men in nursing. *Journal of Advanced Nursing*, *72*(5), 1155–

1168. https://doi.org/10.1111/jan.12905

Stievano, A., & Tschudin, Verena. (2019). The ICN code of ethics for nurses: A time for revision.

International Nursing Review, *66*(2), 154–156. https://doi.org/10.1111/inr.12525

Taberna, M., Gil Moncayo, F., Jané-Salas, E., Antonio, M., Arribas, L., Vilajosana, E., Peralvez Torres, E.,

& Mesía, R. (2020). The Multidisciplinary Team (MDT) Approach and Quality of Care. *Frontiers in

Oncology*, *10*, 85. https://doi.org/10.3389/fonc.2020.00085

Tajfel, H., & Turner, J. (2001). An integrative theory of intergroup conflict. In *Intergroup relations:

Essential readings* (pp. 94–109). Psychology Press.

Valizadeh, L., Zamanzadeh, V., Fooladi, M. M., Azadi, A., Negarandeh, R., & Monadi, M. (2014). The

image of nursing, as perceived by Iranian male nurses. *Nursing & Health Sciences*, *16*(3), 307–313.

https://doi.org/10.1111/nhs.12101

Vatandost, S., Oshvandi, K., Ahmadi, F., & Cheraghi, F. (2020). The challenges of male nurses in the care

of female patients in Iran. *International Nursing Review*, *67*(2), 199–207.

https://doi.org/10.1111/inr.12582

Vere-Jones, E. (2008). Why are there so few men in nursing? *Nursing Times*, *104*(9), 18–19.

Who We Are – About Us | Hospitaller Order of St John of God. (2020, September). Hospitaller Order of

Saint John of God. https://www.sjog-na.org/who-we-are/

World Health Assembly, 64. (2011). *Strengthening nursing and midwifery* (WHA64.7; p. 4). World

Health Organization. https://apps.who.int/iris/handle/10665/3561

Yang, C.-I., Yu, H.-Y., Chin, Y.-F., & Lee, L.-H. (2017). There is nothing wrong with being a nurse: The

experiences of male nursing students in Taiwan. *Japan Journal of Nursing Science*, *14*(4), 332–340.

https://doi.org/10.1111/jjns.12162

Yun, H., Jie, S., & Anli, J. (2010). Nursing shortage in China: State, causes, and strategy. *Nursing Outlook*,

58(3), 122–128. https://doi.org/10.1016/j.outlook.2009.12.002

Zamanzadeh, V., Valizadeh, L., Negarandeh, R., Monadi, M., & Azadi, A. (2013). Factors influencing men

entering the nursing profession, and understanding the challenges faced by them: Iranian and de-

veloped countries' perspectives. *Nursing and Midwifery Studies*, *2*(4), 49–56.

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Appendices

Appendix 1. Author 1: Critical Appraisal of the articles (Hawker et al. 2002)

Author	Abstract and title	Introduction and aims	Method and data	Sampling	Data analysis	Ethics and bias	Results	Transferability or generalizability	Implications and usefulness	Total score
Lyu et al. (2022)	4	4	3	4	4	4	4	4	4	35
Rabie et al. (2021)	3	3	4	4	4	4	4	3	4	33
Mao et al. (2021)	4	4	4	4	3	4	4	3	4	34
Chen et al. (2020)	4	4	4	4	4	3	4	4	4	35
Stanley et al. (2016)	4	4	4	3	3	3	4	4	4	33
Buthelezi et al. (2015)	4	4	4	4	4	3	4	3	4	34
Valizadeh et al. (2014)	4	3	4	4	3	4	4	3	4	34

Appendix 2. Author 1: Data extraction

Author/s,year, Country and Title of study	Context	Methodology	Key Findings	Hawker score
Lyu, X., Akkadechanunt, T., Soivong, P., & Juntasopeepun, P. (2022). Thailand. Factors influencing intention to stay of male nurses: A descriptive predictive study.	In many countries, there is a high shortage of nurses and turnover, and a shortage of male nurse practitioners. This study collected data from 430 registered male nurses through a descriptive, predictive study designed to examine the level of retention intentions and 10 predictors (transformational leadership, career growth, workgroup cohesion, education level, monthly income, professional position, years of experience, gender role conflict, organisational commitment and job satisfaction) of male nurses in China.	A total of 430 registered male nurses who volunteered to participate for at least one year were screened in five university hospitals in Anhui Province and given cover letters, consent forms, questionnaires and envelopes for returning the forms. The authors used descriptive statistics to analyse the demographic data of the sample, Chi-square tests to examine the relationship between demographic factors of male nurses and ITS, and logistic regression analysis to identify predictors of ITS.	The study found that the overall level of ITS (intention to stay) among registered male nurses in China was moderate. The findings of this study can be used to develop future strategies to recruit and retain more male nurses into the nursing profession.	35
Rabie, T., Rossouw, L., & Machobane, B. F. (2021). South Africa. Exploring occupational gender-role stereotypes of male nurses: A South African study.	Minority stereotypes of male occupational roles in the nursing profession have been questioned. This study used a qualitative descriptive design to describe perceptions of male occupational stereotypes in the nursing profession in terms of both extrinsic factors (male nurses) and intrinsic factors (female nurses and discharged patients) to investigate qualitative perceptions of the professional gender roles of male nursing students.	A purposive sample of 30 willing interviewees was drawn from four public hospitals in three of the nine provinces of South Africa. This included 10 male nurses, 10 female nurses and 10 discharged patients. The authors used a qualitative descriptive design with semi-structured interviews as the data collection method, interviewing participants in a private room for an average of 30 minutes, asking questions based on a developed interview guide. The authors used an inductive approach to conduct a thematic analysis of the transcripts.	This study found that male nurses are stereotyped from both an external and internal perspective. Nursing managers, as well as the media, can help break down these stereotypes and assist society in changing the perception of male nurses. This help can be provided through in-service training and open discussion among staff.	33

Mao, A., Cheong, P. L., Van, I. K., & Tam, H. L. (2021). Macau. "I am called girl, but that doesn't matter" - perspectives of male nurses regarding gender-related advantages and disadvantages in professional development.	Exploring the career development experiences of male nurses can help develop strategies to attract men into the nursing profession. The study aimed to investigate the strengths and weaknesses of being a male in the nursing profession as experienced by male nurses and male nursing students in their career development by designing a descriptive qualitative study with a purposive sample of 24 men and semi-structured personal interviews.	The authors used a heterogeneous purposive sampling method to select 24 interested men from Macau, Hong Kong and Mainland China. The participants were questioned for an average of 45 minutes using a semi-structured in-depth interview method through a developed interview guide. Audio recordings were made with the participants' consent and then transcribed verbatim. The authors used classical inductive thematic analysis and used the qualitative research software Nvivo11 Plus for data analysis.	This study reveals men's perceptions of the advantages and disadvantages of being a male in a female-dominated nursing profession. The overall shortage of the nursing workforce, combined with gender imbalance, is a persistent problem in all countries and regions and requires a collective effort by all nurses. The findings of this study provide evidence for the development of strategies to address common problems locally and elsewhere.	34
Chen, Y., Zhang, Y., & Jin, R. (2020). China. Professional Identity of Male Nursing Students in 3-Year Colleges and Junior Male Nurses in China.	Little is known about the occupational identity of male nursing students and junior male nurses in Chinese three-year universities. This study aimed to explore the changing trends and factors influencing the career identity of male nursing students and junior male nursing students in Chinese three-year universities through a purposive sample of 240 individuals, including male nursing students and male nurses, a questionnaire survey on their career identity, and in-depth semi-structured interviews.	The authors recruited 240 male students at Anhui Medical College in Hefei, China, using a social networking platform, and administered the Professional Identity Questionnaire for Nursing Students (PIQNS) to them and conducted semi-structured interviews. The authors used descriptive statistics, t-tests and analysis of variance (ANOVA) for quantitative data analysis and thematic analysis of qualitative data from the unstructured interviews.	This study found that male nursing students at 3-year colleges had a reduced sense of career identity and that junior male nursing students with less work experience had the lowest sense of career identity. Employment opportunities, job security and career progression were the main motivations for career choice. Stressful courses, the pressure of nursing exams, irregular working hours and public discrimination were the main influencing factors. In contrast, organising specific activities, courses and training for men at school or hospital had a positive impact on the formation of career identity.	35
Stanley, D., Beament, T., Falconer, D., Haigh, M., Saunders, R., Stanley, K., Wall,	This study used a non-experimental, comparative, descriptive research methodology to collect data from 1055 questionnaires from registered and enrolled nurses and midwives	A sample of 1055 registered nurses and midwives in Western Australia were sent the Survey-Monkey© questionnaire. The authors used a non-experimental, comparative, descriptive research design with a focus	The study found that job security issues, limited career development opportunities and low morale were the main reasons for the lack of men. Higher levels of recruitment of male nurses could	33

P., & Nielson, S. (2016). Australia. The male of the species: A profile of men in nursing.	in Western Australia with the aim of establishing a profile of male nursing staff in Western Australia and exploring perceptions of male nursing staff from the perspectives of both male and female nurses.	on quantitative methods. The authors used Statistical Products and Services Solutions (SPSS 21) for analysis, descriptive analysis for quantitative analysis and the NVivo10 program for qualitative data.	be sought through targeted recruitment and more outreach at the high school level. In addition, the image and perception of men in nursing could be improved by focusing on a broader cultural mix.	
Buthelezi, S. F., Fakude, L. P., Martin, P. D., & Daniels, F. M. (2015). South Africa. Clinical learning experiences of male nursing students in a Bachelor of Nursing programme: Strategies to overcome challenges.	The way male nurses are perceived and received by nursing staff and patients has an impact on how they view themselves and their role in the profession. This study was a qualitative exploratory study with a purposive sample of 18 male student nurses to explore the learning experiences of male undergraduates during their clinical placements in the Western Cape and how these experiences impacted on their self-esteem.	A purposive sampling method was used to select 18 male student nurses who volunteered to participate in a nursing school in the Western Cape. The authors employed a qualitative research method of focus groups (FG) and used a descriptive epistemological design to examine the lived experiences of the male student nurses based on the descriptions they provided. The authors used Coliazzi's (1978) qualitative analysis method for data analysis.	This study shows that male nursing students continue to experience additional challenges in the clinical setting compared to females. Male students should be provided with more support early in their training programme. This will help them to feel more comfortable sharing their concerns and build confidence in their increasingly mature profession.	34
Valizadeh, L., Zamanzadeh, V., Fooladi, M. M., Azadi, A., Negarandeh, R., & Monadi, M. (2014). Iran. The image of nursing, as perceived by Iranian male nurses.	The stereotypical public image of nursing affects male nurses around the world. This study used a qualitative descriptive design and content analysis with a purposive sample of 18 male nurses in Tabriz, Iran, to conduct semi-structured interviews. The aim was to explore how male nurses in Iran perceive the public perception of nurses and how they see themselves.	Eighteen male nurses were recruited through purposive sampling at Price Government Hospital in Tabriz and Tehran, Iran. The authors conducted in-depth, semi-structured 45-60 minute interviews with the participants through developed interview questions and summarised the interview transcripts. The authors coded common patterns and themes through Graneheim and Lundman's (2004) content analysis guidelines.	The study found that improved and enhanced knowledge and skills had a beneficial impact on male nurses' perceptions of the nursing profession. A comprehensive public education and community awareness is needed for public perceptions of men in nursing to recognise nursing as a non-gender-biased profession and to improve its image. And nurses themselves play a key role in all aspects.	34

Appendix 3. Author 2: Critical Appraisal of the articles (Hawker et al. 2002)

Author	Abstract and title	Introduction and aims	Method and data	Sampling	Data analysis	Ethics and bias	Results	Transferability or generalizability	Implications and usefulness	Total score
Mao et al., (2021)	4	4	3	4	3	4	4	3	4	34
Chen et al., (2020)	3	3	4	4	4	4	4	4	4	34
Arreciado Marañón et al., (2019)	4	4	4	4	3	3	4	3	4	33
Yang et al., (2017)	4	4	4	4	4	3	4	4	4	35
Popper-Giveon et al., (2015)	4	4	4	4	4	3	4	4	4	35
Hollup, (2014)	4	4	4	4	4	4	4	3	4	35
Wallen et al., (2014)	3	4	3	3	4	4	4	4	4	33

Appendix 4. Author 2: Data extraction

Author/s,year, Country and Title of study	Context	Methodology	Key Findings	Hawker score
Mao, A., Cheong, P. L., Van, I. K., & Tam, H. L. (2021). China. 'I am called girl, but that doesn't matter' - perspectives of male nurses regarding gen-der-related advantages and disadvantages in professional develop-ment.	The world is currently experiencing a shortage of nursing staff, particularly male nursing staff. This study focused on the comparative advantages and disadvantages of male nurses and male nursing students in terms of professional development through semi-structured personal interviews with selected nursing students and nurses.	Using purposive sampling, the authors recruited 24 males, including current undergraduate nursing stu-dents, clinical nurses with a bachelor's degree and one year of clinical experience, and interviewed them using semi-structured in-depth interviews of an average duration of 45 minutes. The authors used thematic analysis of the interview results and data analysis of the qualitative data using Nvivo11 Plus.	The findings of this study found that after years of promotion, male nurses are still a minority in the nursing workforce. Howev-er, as public recognition of the profession increases, a positive image of nurses is created, which in turn improves public attitudes towards male nurses, and the image of male nurses. Also men are better at resolving problematic situations (nurse-patient conflicts).	34
Chen, Y., Zhang, Y., & Jin, R. (2020). China. Professional Identity of Male Nursing Students in 3-Year Colleges and Junior Male Nurses in China.	The authors argues that the nursing shortage is not only due to the fact that fewer and fewer people are looking at nursing as a desirable career, but also because of the generally low professional identity of nurses. The study collected data through separate questionnaires and in-depth semi-structured interviews with current and prac-tising male nursing students in order to under-stand the changing trends and factors influencing the professional identity of different male nursing students.	The authors used a questionnaire to collect data and a total of 240 male nursing students participated in the survey. Finally, semi-structured interviews were con-ducted and recorded with 20 of these students (5 male nurses and 15 male nurses). The authors used SPSS 22.0 software for t-test and ANOVA and conducted thematic analysis of the interviews.	This study found that undergraduate nurs-ing students had a lower sense of profes-sional identity than three-year nursing students, with junior male nurses having the lowest sense of professional identity. Family responsibility and the number of relatives in the healthcare system were positively associated with career identity, and heavy workload and gender stereo-types were negatively associated with career identity. Nursing exams and courses also influenced career identity.	34

Arreciado Marañón, A., Rodríguez-Martín, D., & Galbany-Estragués, P. (2019). Spain. Male nurses' views of gender in the nurse-family relationship in paediatric care.	As nursing has historically been associated with femininity, this has somewhat influenced men to enter the nursing profession and, due to gender stereotyping, men have far greater difficulties with interpersonal skills than with nursing skills.	The authors used purposive sampling, semi-structured interviews and content analysis to collect data and analyse data from male nurses working in maternal and child health, based on the criteria of homogeneity-regularity and heterogeneity-diversity.	The study analysed the content of interviews with several male nurses and concluded that male nurses did not share the stereotype of nursing as a female profession and that they appreciated their work.	33
Yang, C.-I., Yu, H.-Y., Chin, Y.-F., & Lee, L.-H. (2017). China. There is nothing wrong with being a nurse: The experiences of male nursing students in Taiwan: Experience of male nursing students.	Gender stereotypes in nursing can cause stress and tension for male nurses/male nursing students and can make them feel excluded and isolated. This study discusses the experiences of coping with gender stereotypes as male nursing students through interviews with a number of male nursing students.	The study used qualitative research methods to collect data through in-depth semi-structured interviews with 24 male nursing students from several different educational institutions, which were analysed through thematic analysis.	The study found that male nursing students were the least stressed compared to other (clinical male nurse) roles. Having experienced barriers in different environments, most tended to be positive and find ways to overcome them.	35
Popper-Giveon, A., Keshet, Y., & Liberman, I. (2015). Israel. Increasing gender and ethnic diversity in the health care workforce: The case of Arab male nurses in Israel.	Israel is working to increase the diversity of its health care workforce. However, there are still relatively few men in the traditionally female profession, with the exception of the Arab nurse community. The study explores the reasons why male nurses are not in the minority here, by examining data given by the Central Bureau of Statistics and interviewing some Arab nurses.	The study used both quantitative and qualitative methods, with quantitative statistics from the Israeli Central Bureau of Statistics and qualitative data from semi-structured in-depth interviews with Arab nurses.	The results of the study found that nursing is the main form of employment for Arab men in Israel. Men are not a minority among Arab nurses, but some of them do not intend to continue working in nursing.	35
Wallen, A. S., Mor, S., & Devine, B. A. (2014). American. It's about	Female-dominated work may cause men to have conflicting or overlapping ideas about their professional identity and gender. This study focuses on	Web-based questionnaires were distributed among members of the American Association of Men's Nursing (AAMN) Nursing Forum (all registered nurses) and,	GPII was positively associated with two types of job attitudes, job satisfaction and affective commitment. The results of this	35

respect: Gen-der–professional identity integration affects male nurses' job attitudes.	the impact of gender-professional identity on the nursing work of male nurses.	after excluding some useless and suspected invalid questionnaires (too short a response time, etc.), data were collected for statistical and analytical purposes.	study suggest that feelings of nursing respect help explain the relationship between GPUs and job attitudes and suggest that one potential reason why GPUs influence job satisfaction and affective commitment is feelings of respect.	
Hollup, O. (2014). Mauritius. The impact of gender, culture, and sexuality on Mauritian nursing: Nursing as a non-gendered occupational identity or masculine field? Qualitative study.	As nursing is defined internationally as a predominantly female profession, it is already common for there to be a smaller group of male nurses. This study explored the impact of gender and cultural perceptions on the development of nursing in Mauritius through interviews with participants.	The study used a qualitative approach, based on in-depth semi-structured interviews and convenience sampling, to collect and analyse data from nurses in five different hospitals.	The findings of this study indicate that there is no gender imbalance and feminisation of nursing in Mauritius and that the entry of men into the nursing field has had a beneficial impact on nursing.	33